## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P98000002436

G. & B. PROFESSIONAL CLEANING, INC.

## **FILED** Mar 17, 1999 8:00 am Secretary of State 03-17-1999 90131 025 \*\*\*150.00



Principal Place 4545 PARNELL SARASOTA FL	DR	Mailing Address 4545 PARNELL DR SARASOTA FL 34232		DO NOT WRITE IN TH		
				01/07/1998	Austral	
2. Principal Pl	rasoth parular	2a. Mailing Address 26 4545 Pacn	ell DR	4. FEI Number 65-0319443	Applied For Not Applicable	
Suite, Apt.	#, etc	Suite, Apt #, etc		5. Certifcate of Status Desired	\$8.75 Additional Fee Required	
City & State	Scota PC Country +	City & State  28 SALAS OTA  210  29 3+232  30	FL Country SARWSOTA		☐ Yes ☑ No	
	9. Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New Register	ed Agent	
GUTIERREZ LIRIEL				ess (B.O. Box Number is Not Acceptable)		
4545 PARNELL DR			1021	ess (BO. Box Number is Not Acceptable)		
			SAILS	Set 0		
			84 City	F	L 85 Zip Code 232	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature borest or professions and processions applicable.  NOTE Registered Agent signature requires when registating)  DATE						
12.	Signature, typed or printed name of registery, ago.  OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12	
TITLE	PD		1 TITLE	<u> </u>	Change Addition	
NAME	BORRERO, JUAN	1	12 NAME			
STREET ADDRESS	4545 PARNELL DR	1	3 STREET ADDRESS			
CITY- ST- ZIP	SARASOTA FL 34232		I 4 CITY-ST-ZIP		Change Addition	
TITLE	VD	_	2 1 TITLE 2 2 NAME			
NAME	Gutierrez, uriel 4545 Parnell dr		2 3 STREET ADDRESS			
STREET ADDRESS	SARASOTA FL 34232		2 4 CITY-ST-ZIP			
CITY-ST-ZIP TITLE	D		31 TITLE		☐ Change ☐ Addition	
NAME	BORRERO, PATRICIA	<b> </b>  :	3 2 NAME			
STREET ADDRESS	4545 PARNELL DR.	1:	3 STREET ADDRESS			
CITY-ST-ZIP	SARASOTA FL 34232		3.4 CITY-ST-ZIP			
TITLE	D	- · · · · · · ·	: गाम्ह 		Change Addition	
NAME	BUITRAGO, MARIA ELENA		2 NAME			
STREET ADDRESS	4545 Parnell dr. Sarasota Fl 34232		1 3 STREET ADDRESS			
CITY-ST-ZIP	UNINCUTATE STAGE		4 4 CITY-ST-ZIP 5 1 TITLE		Change Addition	
NAME		_	5 2 NAME			
STREET ADDRESS			5 3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY - ST - ZIP			
TITLE			6 1 TITLE		☐ Change ☐ Addition	
NAME		1	5.2 NAME			
STREET ADDRESS		1	6 3 STREET ADDRESS			

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607. Florida Statutes: and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

JUN BONKERO- Fresident