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Secretary of State

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PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P98000013579

1. Corporation Name

JANITORIAL SERVICE, INC.



Principal Place of Business

205 SE 16TH AVE., #34D
GAINESVILLE FL 32601

Mailing Address

205 SE 16TH AVE., #34D
GAINESVILLE FL 32601

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/09/1998

4. FEI Number

92-2086006

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution\$5.00 May Be
Added to Fees8. This corporation owes the current year Intangible
Personal Property Tax.

Yes No

2. Principal Place of Business

21 RT 12, BOX 155

2a. Mailing Address

26 RT 12, BOX 155

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 OAKLANE

27 OAKLANE

City & State

City & State

23 LAKE CITY

28 LAKE CITY

Zip

Country

Zip

Country

24 32025 25

29 32025 30

9. Name and Address of Current Registered Agent

BUSZKO, ANDRZEJ
205 SE 16TH AVE., #34D
GAINESVILLE FL 32601

10. Name and Address of New Registered Agent

81 Name ANDRZEJ BUSZKO

82 Street Address (P.O. Box Number is Not Acceptable)

RT 12, BOX 155

83 OAKLANE

84 City LAKE CITY

FL

85 Zip Code 32025

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, am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

ANDRZEJ BUSZKO, REG. AG. 3/02/99

12. OFFICERS AND DIRECTORS

TITLE PRESIDENT

NAME ANDRZEJ BUSZKO

STREET ADDRESS RT 12 BOX 155

CITY-ST-ZIP LAKE CITY FL 32025

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

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CITY-ST-ZIP

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NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ANDRZEJ BUSZKO

12 NAME RT 12, BOX 155, OAKLANE

13 STREET ADDRESS LAKE CITY, FL 32025

14 CITY-ST-ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

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 for 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ANDRZEJ BUSZKO

3/02/99

904-755-0816

Date

Daytime Phone #

CR2E034 (11/98)