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

Mailing Address

350 84TH STREET

APT. 3

PROFIT CORPORATION ANNUAL REPORT

1999

Principal Place of Business

350 84TH STREET

APT. 3



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000019641

EF CLEANING SERVICES, INC.

MIAMI BEACH FL 33141 MIAMI BEACH FL 33141 3. Date Incorporated or Qualifed 03/02/1998 Applied For 4. FEI Number 65-0817193 2a. Mailing Address 2. Principal Place of Business Not Applicable 21 26 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required. 27 22 \$5.00 May Be City & State City & State 6. Election Campaign Financing Added to Fees Trust Fund Contribution 23 28 Zip Country 8. This corporation owes the current year Intangible Country Zip 30 Personal Property Tax. 29 25 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name FIGUEROA, ELIZABETH Street Address (P.O. Box Number is Not Acceptable) 82 350 84TH STREET APT. 3 83 MIAMI BEACH FL 33141 85 Zip Code 84 City 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature requir ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 12. OFFICERS AND DIRECTORS ☐ DELETE 1.1 TITLE TITLE 1.2 NAME NAME FIGUEROA, ELIZABETH 350 84TH STREET APT 3 1.3 STREET ADDRESS STREET ADDRESS MIAMI BEACH FL 33141 1.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 2.1 TITLE TITLE 2.2 NAME FIGUEROA, BENITO NAME **350 84TH STREET** 2.3 STREET ADDRESS STREET ADDRESS MIAMI BEACH FL 33141 2. 4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition □ DELETE 3.1 TITLE TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change DELETE 41 TITLE TITLE 4, 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change ☐ DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Addition

TITLE

NAME

STREET ADDRESS

DELETE

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 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 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.

Change

FILED Mar 03, 1999 8:00 am

Secretary of State

03-03-1999 90070 014 ***150.00

DO NOT WRITE IN THIS SPACE

CR2E034 (11/98)