PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

FILED Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90038 018 ***150.00

DOCUI	MENT # P980000	25855					
1. Corporation Name CRYSTAL CLEAN MAID SERVICE, INC.							
UNISIM	E CLERIA HIMID SENVICE, INC	!•			. A CONTRACT LIG TOLET HAZER BUILT ORDER #4111 BUILT HAZE	II 616 1 1116 1	HER RIN ISC
	•			}			
Principal Place	of Business	Mailing Address			s searcas i ca séral i del éétis contradit entin estin de	P 4 11 12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	produ 9111 1981
2063 RIVER REACH DRIVE #391 2063 RIVER REACH DRIVE #391							
NAPLES FL 341		NAPLES FL 34104			DO NOT WRITE IN THIS SI	PACE	
1				- [3. Date Incorporated or Qualified		
					03/19/1998		No. of Face
	ace of Business LACOSTA CIRCLE	2a. Mailing Address 26 2235 LACO	STA CIR	10	59 - 3501073		Applicable
21 3 3 3 5 Suite, Apt.		26 3235 LACC Suite, Apt. #, etc.	71 H C1~			\$8.75 A	
	.303	20 E . TO A 12			5. Certificate of Status Desired	Fee Re	quired
City & State		City & State	.: ا-م		6. Election Campaign Financing	\$5.00	
22/10	01R7 1-1	28 1 40 162	Country		Trust Fund Contribution	Added to	D F893
Zig (6.16	Country Country	29.34105 3	¬ ^ _ `\	:0	This corporation owes the current year Intan Personal Property Tax.		No
24 341	9. Name and Address of Current R		9 501116		10. Name and Address of New Registered Ag	ent	
81 Name DA					NEIA S. FARI		ł
BONAQUIST, JAMES A JR. CARDILLO, KEITH & BONAQUIST, P.A. 82 Street					(P.O. Box Number is Not Acceptable)	N N	1.307
3550		83	477	LACOSTA CIENTE	1 13.6	1:20	
NAP							
		-	84 City	1	nles FL		10.5
11. Pursuant	to the provisions of Sections 607.0502 a	nd 607.1508, Florida Statutes	, the above-named	corpor	ation submits this statement for the purpose of ch	anaina ite	registered
office or n	egistered agent, or both, in the State of I m familiar with, and accept the obligation	Floride. Such change was aut as of, Section 607(0505, Florid	horized by the con la Statutes.	oration:	s board of directors. I hereby accept the appointment of the special statement for the purpose of or the special statement for the special sta	neniasreç	lizieien
SIGNATURE	C DOWN THE		\sim			<u> </u>	\
	Signature, typed or printed name of regulated agent or OFFICERS AND		egistered Agent signature 13.	reduired w	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTO	RS IN 12
12.	PSTD	DELETE	1.1 DILE			Change	Addition
NAME	EARL, PAMELA S		1.2 NAME		a = 1 nearth Cilcle	Q.p	1.303
STREET ADDRESS	2063 RIVER REACH DRIVE #391		1.3 STREET ADDRESS	33	35 LACOSTA CIRCLE	1 -4	~·••
CITY-ST-ZIP	NAPLES FL 34104		1.4 CITY-ST-ZIP	4	pies, F1 34105	Change	Addition
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STREET ADDRESS			2.4 CITY-ST-ZIP	1			
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CITY-ST-ZIP		·	5.4 CITY-ST-ZIP	↓	·	Channa	Addition
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NAME			5.3 STREET ADDRESS				
STREET ADDRESS	·		8.4 CITY-ST-ZIP	1			1
CITY-ST-ZIP	l		W-7	1			

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 effactment with an address, with all other like empowered.

SIGNATURE:

NOOD S CALBRAGESPLENDITUMBER

100 / 22/00 (941) 250-4115