

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

FILED  
Mar 03, 1999 8:00 am  
Secretary of State

03-03-1999 90012 043 \*\*\*150.00

0497602

DOCUMENT # P98000040419

1. Corporation Name

SERVICE SOLUTIONS CLEANING SERVICE, INC.

Principal Place of Business

3908 BELMOOR DRIVE  
PALM HARBOR FL 34685

Mailing Address

3908 BELMOOR DRIVE  
PALM HARBOR FL 34685

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/05/1998

4. FEI Number

59-3508373

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional  
Fee Required

6. Election Campaign Financing



\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax.



Yes



No

2. Principal Place of Business

21 4500 140TH AVE.

Suite, Apt. #, etc.

22 216

City & State

23 Clearwater Florida

Zip

24 33762

Country

25 US

2a. Mailing Address

26 4500 140TH AVE.

Suite, Apt. #, etc.

27 216

City & State

28 Clearwater, Florida

Zip

29 33762

Country

30 US

9. Name and Address of Current Registered Agent

COSNOW, JEFFREY E  
3450 EAST LAKE ROAD  
PALM HARBOR FL 34685

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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 required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☒ DELETE

NAME RAFTER, CLIFF  
STREET ADDRESS 3908 BELMOOR DRIVE  
CITY-ST-ZIP PALM HARBOR FL 34685

TITLE STD ☒ DELETE

NAME RAFTER, JENNIFER  
STREET ADDRESS 3908 BELMOOR DRIVE  
CITY-ST-ZIP PALM HARBOR FL 34685

TITLE PD ☐ DELETE

NAME RAFTER, CLIFF  
STREET ADDRESS 4500 140TH AVE SUITE 216  
CITY-ST-ZIP CLEARWATER, FL 33762

TITLE STD ☐ DELETE

NAME RAFTER, JENNIFER  
STREET ADDRESS 4500 140TH AVE SUITE 216  
CITY-ST-ZIP CLEARWATER, FL 33762

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

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.

SIGNATURE

JENNIFER RAFTER

JENNIFER RAFTER 2/16/99 727-507-9482

Date

Daytime Phone #

CR2E034 (11/98)