SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT #

GATOR CLEANING, INC.

1, Corporation Name

FILED Sep 23, 1999 8:00 am Secretary of State

09-23-1999 90001 001 ***150.00



Driver of Driver of Driver						
Principal Place of Business		Mailing Address	494"			
NAPLES FL 3		699 CYPRESS WAY EAST				
NAPLES FL 34110 NAPLES FL 34110						DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified
						05/15/1998
Principal Place of Business 2a. Mailing Address						4. FEI Number Applied For
21		26				59-3524324-0824W Not Applicable
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.				\$8.75 Additional
22		27			5. Certificate of Status Desired Fee Required	
City & State		City & State			6. Election Campaign Financing \$5.00 May Be	
23	28					Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country			8. This corporation owes the current year
24	25		30			Intangible Personal Property. Yes No
	9. Name and Address of Current	Registered Agent				10. Name and Address of New Registered Agent
CO	RPORATION SERVICE COMPANY		6	31 1	Name	
	11 HAYS STREET	8:		32 3	Street Addres	ss (P.O. Box Number is Not Acceptable)
	LAHASSEE FL 32301-2525	83		33		
				Í	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		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	DELETE	1,1 TITLE	E		Change Addition
NAME	MARTIN, CAROLINE M		1.2 NAME	E		Carlos Ca
STREET ADDRESS	-609 CYPRESS WAY EAST		1.3 STRE	ET AD	DRESS 40	IN CURROSS Was East
CITY-ST-ZIP	NAPLES FL 34110		1.4 CITY-	-ST-ZIF	P '	14 Cypress Way East
TITLE	STD	DELETE	2.1 TITLE			Change Addition
NAME	Martin, Bobby G	<u></u>	2.2 NAME			,
STREET ADDRESS	609 CYPRESS WAY EAST		2,3 STRE	ETADI	DRESS 49	H Minross I. Day Eust
CITY-ST-ZIP	NAPLES FL 34110		2 4 CITY-	ST-ZIF	,	4 Cypress Way East
TITLE	VO	DELETE	3.1 TITLE	3.1 TITLE		Change Addition
NAME	MARTIN, ROSE M		3.2 NAME		1	Onlingo / reduitor /
STREET ADDRESS	512 105TH AVENUE NORTH		3.3 STREE	ET AD(ORESS	
CITY-ST-ZIP	NAPLES FL		3.4 CITY-ST-2		•	İ
TITLE		DELETE	4.1 TITLE			Change Addition
NAME			4.2 NAME	ξ.		C Smarge C Addition
STREET ADDRESS			4.3 STREE	ET ADO	DRESS	
CITY-ST-ZIP	<u> </u>		4.4 CITY	ST-ZiP	,	
TITLE		DELETE	5.1 TITLE			Change Addition
NAME		_	5.2 NAME	Ē		
STREET ADDRESS			5.3 STREE	ET ADO	DRESS	
CITY-ST-ZIP	·		5.4 CITY-5			
TITLE		DELETE	6.1 TITLE			Change Addition
NAME			6.2 NAME			Change Addition
STREET ADDRESS			6.3 STREE	ET ADE	DRESS	}
CITY-ST-ZIP			6.4 CITY-S			
	ertify that the information supplied with t	his filing does not qualify for the				2 110 07/2Vi) Elorido Statutos I fuebra contifutbat the información

in Block 12 or Block 13 if changed, or on an attachment with an address.

9-15-99