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

DOCUMENT # P98000066467

		_	
Principal	Place	of	Business

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

02-23-1999 90044 003 ***150.00

TAYLOR	MAID CLEANING, INC.							
Principal Place	e of Business	Mailing Address				I I BELLEGE FIN TEIRL FRIST SENT SEUT SEUT SEUT SEUT SEUT SEUT SEUT SEU	DICER BOYL BIRTH	BIELE 1887 1881
1115 133RD STREET EAST 1115 133RD STREET EAST BRADENTON FL 34202 BRADENTON FL 34202						DO NOT WRITE IN THIS	SPACE	
						3. Date Incorporated or Qualifed		
						07/29/1998		
n Daineine D	lace of Business	2a. Mailing Address				4. FEI Number	An	plied For
Z. Principal P	lace of business					59 - 3524778		t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc	;			5. Certificate of Status Desired	\$8.75 A	Additional
City & Stat		City & State			 	6. Election Campaign Financing	\$5.00	•
- '	e	28				Trust Fund Contribution	Added to	
Zip	Country	Zip	Cou	intrv		This corporation owes the current year Int.		
- -,	25	29	30			Personal Property Tax.		□No
24	9. Name and Address of Curre					10. Name and Address of New Registered	Agent	
481		, regional region		81	Name			
KRUEGER-TAYLOR, KATHLEEN P 1115 133RD STREET EAST			82	Street Addr	ress (P.O. Box Number is Not Acceptable)			
BRA	DENTON FL 34202			83		·		,
				84	City	FL	85 Zip (Code
SIGNATURE	T _	ND DIRECTORS	13.		signature require	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTO	R\$ IN 12
TITLE	D	☐ DELE	***				☐ Change	☐ Addition
NAME	KRUEGER-TAYLOR, KATHLEE	NP	1.2 N/					
STREET ADDRESS	l .		1351	TREET A	ADDRESS			
CITY-ST-ZIP	BRADENTON FL 34202			ITY-ST-	ZIP		Change	Addition
TITLE		☐ DELE					□ Cilaiige	☐ ∧ooiiioii
NAME			2.2 N					
STREET ADDRESS			1		ADDRESS			
CITY-ST-ZIP		∏ DELE		ITY-ST	- ZIP		☐ Change	☐ Addition
TITLE						•	_ 0	
NAME			3.2 N					
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP		☐ DELE		TIF	-214	<u></u>	Change	☐ Addition
TITLE		_ 5000	4.1 II					
NAME					ADDRESS			
STREET ADDRESS				ITY-ST-				
CITY-ST-ZIP TITLE		☐ DELE			ZIF		☐ Change	☐ Addition
NAME		_ 2200	5.2 N			·	=	
STREET ADDRESS					ADDRESS	•		
				TY-ST-	ì			
CITY-ST-ZIP TITLE		☐ DELE					☐ Change	☐ Addition
NAME			6.2 N					
			6.3 5	TREET A	ADDRESS			
STREET ADDRESS	ì			ITY-ST-				

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.

SIGNING OFFICER OR DIRECTOR