

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 14, 2008 08:00 AM
Secretary of State

DOCUMENT # P98000079776

1. Entity Name

WRIGHT'S FLOOR CLEANING SERVICES, INC.



Principal Place of Business

4441 N.W. 43RD STREET
LAUDERDALE LAKES, FL 33319

Mailing Address

4441 N.W. 43RD STREET
LAUDERDALE LAKES, FL 33319



04092008

No Chg-P

CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0873289

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

JACOBS, REUBEN C
2759 NW 47 TERRACE
LAUDERDALE LAKES, FL 33313

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IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D
NAME WRIGHT, KEITH
STREET ADDRESS 4441 N.W. 43RD STREET
CITY-ST-ZIP LAUDERDALE LAKES, FL 33319

TITLE D
NAME WRIGHT, MAXINE D
STREET ADDRESS 4441 N.W. 43RD STREET
CITY-ST-ZIP LAUDERDALE LAKES, FL 33319

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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U000000898676
04/25/08-80018-002 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **KEITH WRIGHT**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-10-08

Date

Daytime Phone #