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 # P98000086536

1. Corporation Name

Feb 26, 1999 8:00 am Secretary of State

02-26-1999 90065 023 ***150.00

BYRD L/	AWN MAINTENANCE, INC.						
Principal Place of Business Mailing Address				. I TORIGORI WE INION CONT. BOTH CONTRACTOR OF A DISSO AND A DISSO	1901		
140 QUEENS LANE 140 QUEENS LANE ROYAL PALM BEACH FL 33411 ROYAL PALM BEACH FL 33411							
					DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualifed 10/08/1998		
2. Principal P	Principal Place of Business 2a. Mailing Address			4. FEI Number Applied For		אר	
21		26			59 - 1496465 Not Applica		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	\pt. #, etc.		5. Certificate of Status Desired S8.75 Additional Fee Required		
City & Stat	e	City & State	/ & State		Election Campaign Financing Trust Fund Contribution Added to Fees	,	
Zip	Country	Zip	Count	try	8. This corporation owes the current year intangible		
24	9. Name and Address of Curren	29 3	10 ₁		Personal Property Tax. ANO 10. Name and Address of New Registered Agent		
	g. Name and Address of Curren	it Registered Agent	8	1 Name	to, mante and radioss of flow registered right.	\neg	
BYR	D, CLARENCE		L				
140 QUEENS LANE			8	Street A	Address (P.O. Box Number is Not Acceptable)	ŀ	
ROYAL PALM BEACH FL 33411				33			
1			8	City	FL 85 Zip Code		
11. Pursuant office or ragent. I a	to the provisions of Sections 607.050 egistered agent, or both, in the State im familiar with, and accept the obliga Signature, typed or printed name of registered ager	tions of, Section 607.0505, Florid	ia Statuti	es.	corporation submits this statement for the purpose of changing its register ration's board of directors. I hereby accept the appointment as registered	ed	
12.	<u> </u>	ID DIRECTORS	13.	gerit signature re	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1	12	
TITLE	D	DELETE	1.1 TITLE	E		ddition	
NAME	BYRD, CLARENCE		1.2 NAM	E		1	
STREET ADDRESS	0117710 1 1117		1.3 STREET ADDRESS		•		
CITY-ST-ZIP	ROYAL PALM BEACH FL 3341	1	1.4 CITY		•		
TITLE		DELETE	2.1 TITLE		☐ Change ☐ Ad	ddition	
NAME			2.2 NAM	E	*		
STREET ADDRESS			2.3 STRI	EET ADDRESS		.	
CITY-ST-ZIP			2.4 CITY	r-ST-ZIP			
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CITY-ST-ZIP				-ST-ZIP		alalisi	
TITLE	1	□ DĒLETĒ	5.1 TITLI	E	Change Ac	ddition	

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 of supplemental annual report is true and accordate 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 on 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.

5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

SIGNATURE:

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

□ DELETE

Change

☐ Addition