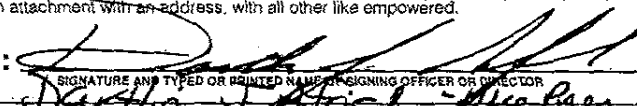


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 16, 2004 08:00 AM
Secretary of State

DOCUMENT # P99000104349			
1. Entity Name AFRICH MAINTENANCE, INC.			
Principal Place of Business 5407 BOGGY CREEK RD. ORLANDO, FL 32824	Mailing Address 5407 BOGGY CREEK RD. ORLANDO, FL 32824		
DO NOT WRITE IN THIS SPACE			
		01062004 No Chg-P CR2E034 (10/03)	
		4. FEI Number 59-3609075	Applied For ☐ Not Applicable
		5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent AFRICH, LINDA S 5407 BOGGY CREEK RD. ORLANDO, FL 32824			DO NOT WRITE 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, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐	\$5.00 May Be Added to Fees
		U00000115462 04/16/04-80025-008 150.00	
10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P AFRICH, LINDA S 5407 BOGGY CREEK RD ORLANDO, FL 32824		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPST AFRICH, DARTLIN J 5407 BOGGY CREEK RD. ORLANDO, FL 32824		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
12. 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 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: 		4/7/04 4724-0408 Date Daytime Phone #	