**FILED** 

Mar 04, 1999 8:00 am Secretary of State

03-04-1999 90059 045 \*\*\*150.00

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # S01854

1. Corporation	Name	7		,	
	IRDUCT CLEANING, INC.				
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				f INDEXION IN ANIEL MAN ANIEL MAN ANIEL MAN ANIEL MAN	37831 BIBIT ALBIE PIPIT 34811 1931
Principal Place	of Business	Mailing Address		1001/0/10 IEI DOED IEIDEI INDI DIEI	I OSOTA DINSI NINIS DEBIT NINIS INDE
2450 WEST 82ND STREET 2450 WEST 82ND STREET					
UNIT 302	AD STREET	UNIT 302			
HIALEAH FL 33016 HIALEAH FL 33016			DO NOT WRITE IN TH	S SPACE	
US		US		3. Date Incorporated or Qualifed	1
				09/21/1990	
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0221547	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27		<u></u>	Fee Required
City & State	e	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28	6	Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year	ntangible
24	25	29 3	0	Personal Property Tax.  10. Name and Address of New Registere	
9. Name and Address of Current Registered Agent  81 Name					
HOOPER, LARRY K. C.P.A.			LAR	RY K. HOOPER C	PA
711 EAST 38TH STREET				ress (P.O. Box Number is Not Acceptable)	AUENUE
HIALEAH FL 33013			83	93 3:00 / //	
1,111			63		
			84 Cily	nESTEAD F	L 85 33030
			77071		
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 ar	m familiar with, and accept the obliga	tions of, Section 607.0505, Florid	la Statutes.		
SIGNATURE				ad when reinstalting) DATE	
	Signature, typed or printed name of registered age	nt and title if applicable. (NOTE: R	egistered Agent signature require	ADDITIONS/CHANGES TO OFFICERS /	AND DIRECTORS IN 12
12.	PD	DELETE	1.1 TITLE	ABOTTOTOTOTIATOES TO ST. TOETS	☐ Change ☐ Addition
NAME	BARRABI, JOE	<b></b>	1.2 NAME		
STREET ADDRESS	1880 SW 133 AVE		1,3 STREET ADDRESS		}
1	MIRAMAR FL		1.4 CITY-ST-ZIP		
CITY-ST-ZIP TITLE	VD	☐ DELETE	2.1 TITLE		Change Addition
NAME	Barrabi, Elena		22 NAME		
\	1880 SW 133 AVE		2.3 STREET ADDRESS	•	
STREET ADDRESS	MIRAMAR FL				. "
CITY-ST-ZIP	NAME AND ASSESSED TO THE PROPERTY OF THE PROPE	☐ DELETE	2.4 CITY-ST-ZIP 3.1 TITLE		☐ Change ☐ Addition
NAME		_ 5000.0	3.2 NAME		_ , _ ,
			3.3 STREET ADDRESS		ļ
STREET ADDRESS			3.4. CITY-ST-ZIP		
CITY-ST-ZIP TITLE		☐ DELETE	4.1 TITLE	<del></del>	☐ Change ☐ Addition
NAME			4, 2 NAME		_ ,
STREET ADDRESS			4.3 STREET ADDRESS		
			4.4 CITY-ST-ZIP		
CiTY-ST-ZIP		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		-;
STREET ADDRESS			5.3 STREET ADDRESS		{
CITY-ST-ZIP			54 CITY-ST-ZIP		.
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			: 6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		·

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.

6.4 CITY-ST-ZIP

SIGNATURE:

ELENA BARRABI

2/11/99 305 827 3828