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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

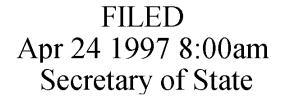
Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S09804

(3)

N.M. PROPERTY MAINTENANCE, INC.



Principal Place		Mailing Address					
1489 W. PALMETTO PARK ROAD SUITE 480— BOCA RATON FL 33486		1489 W. PALMETTO PARK ROAD SUITE-488 BOCA RATON FL 33486-3326			3. Date Incorporated or Qualified	3a. Date of Las	t Report
					10/30/1990 : 04/15/1996		
2. Principal Place A Bysinoss 21/489 w. LAL METTO PARK RD. 26/1489 w. LALMETTO			NETTO PARK	B	4. FEI Number	-	Applied For
21 / 7 0	H. ALC.	26 /4 89 w 1A4	nc/10/HPF	W.	65-0229282	□ \$8.7	Not Applicable 5 Additional
27 485					Certificate of Status Desired		Required
City & State	RATON, FL	28 BOCA RATON	FL.	ļ	Election Campaign Financing Trust Fund Contribution		00 May Be ad to Fees
- ZD-11	Country D	Zip	Country		This corporation has liability for in		
24 277	06 26 PALM BEACH		o YALM BEA	CH		Yes No	
Name and Address of Current Registered Agent MALINOWSKI, NAZARIUSZ 81					10. Name and Address of New Reg	listered Agent	
1489	82 Street Address (P.O. Box Number is Not Acceptable)						
SUITE 480~ 485					- (1.0. 50) Hallist 10 Het (1.000)		
BOCA RATON FL 33486			83				
			84 City		,	FL 85 Z	ip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corpora office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation agent. I am largillar with, and accept the obligations of, Section 667.0505, Plorida Statutes.					ation submits this statement for the probe accept	urpose of changin	g its registered
agent. I a	m familiar with, and accept the obligat	ons of, Section 66, 0505, Plori	da Statutes.	. 0		W	' Togioloica
SIGNATURE	NAZARUSZ //A L // Signature, typed or printed name of registered agent	NOWSKI (NOW) F	logisleyel Agent signature	required	when reinstaling)	7/15/9	<u> </u>
12.	OFFICERS AND		(3)		ADDITIONS/CHANGES TO OFFIC		
TITLE NAME	P Malinowski, nazariusz	☐ DELETE	1.1 TITLE 1.2 NAME			L Chang	ge 🔲 Addition
STREET ADDRESS	1489 W. PALMETTO PARK ROA	D. SUITE 480 485	1,3 STREET ADDRESS				
CITY-ST-ZIP	BOCA RATON FL 33486		1.4 City - S1 - ZiP				
TITLE		DELETE	21 TITLE			☐ Chang	e 🔲 Addition
NAME STREET ADDRESS			2.2 NAME 2.3 STREET ADDRESS				
CITY-ST-ZIP			2.4 CITY-ST-ZIP				
TITLE		☐ DELETE	3.1 TITLE			Chang	ge Addition
NAME			3.2 NAME				
STREET ADDRESS Offy-St-Zip			3.3 STREET ADDRESS 3.4. CITY - ST - ZIP				
TIFLE		DELETE	4,1 TITLE			☐ Chang	e Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET ADDRESS				
CITY-ST-ZIP		DELETE	4.4 CITY-ST-ZIP 5.1 TITLE			Chang	ie Addition
NAME :	÷ (2)		5.2 NAME				, <u> </u>
STREET ADDRESS			5.3 STREET ADDRESS				
CITY-ST-ZIP-	The second secon	DELEJE	54 CITY-ST-ZIP			Chang	e Addition
NAME		[_] brrrst	6.1 TITLE 6.2 NAME			ET CHAIL	NOTIFIED ACCURATE
STREET ADDRESS			6.3 STREET ADDRESS				
CITY-ST-ZIP		the state of the s	6.4 CHY-S1-ZIP			-,	
information I am an of appears in	by certify that the information supplied in indicated on this annual report or su fficer or director of the corporation or the in Block 12 or Block 13 if papers of	win inis filing does not qualify to optemental annual report is the no receiver or trust to empower in an intermed with or reduce	ior the exemption slope and accurate and educate this ress.	iated ir that m oport s	n section 119.07(3)(I), Florida Statules y signature shall have the same legal is required by Chapter 607, Florida St	 i further certify the effect as if made tatutes; and that if 	nat the under oath; that ny name