

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra H. Morton
Treasurer of State
Tallahassee, FL 32399-0400

APPROVED
AND
FILED

95 MAY 11 11:10:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # S27523 (7)

For Corporation Name

LIFT STATION MAINTENANCE, INC.

Corporate Office Address

2151 NW 72 AVE
2ND FLOOR
MIAMI FL 33122
US

Mailing Address

11549 SW 109 RD
UNIT B
MIAMI FL 33176
US

(DO NOT WRITE IN THIS SPACE)

3. Date Incorporated or Qualified

01/25/1991

3a. Date of Last Report

05/23/1994

4. FEI Number

65-0261945

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contributions

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes. ☐ Yes ☒ No

2. Principal Place of Business

21 3132 NW 72 Ave

2a. Mailing Address

26 3132 NW 72 Ave

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City, State

23 Miami, FL

City, State

28 Miami, FL

24 33122

Country

25 USA

29 33122

Country

30 USA

9. Name and Address of Current Registered Agent

PLATON, STELLA
2401 NW 93RD AVENUE
MIAMI FL 33172

10. Name and Address of New Registered Agent

81 Name

Platon Stella

82 Street Address (P.O. Box Number is Not Acceptable)

3132 NW 72 Ave

83 City

Miami

FL

85 Zip Code

33122

11. Pursuant to the provisions of Sections 601, 602, and 603, 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 am familiar with and accept the obligations of Tax Law 1997.032, Florida Statutes.

Signature

(Signature of Registered Agent or Director)

(Signature of Registered Agent or Director)

Date

12. OFFICERS AND DIRECTORS

1. NAME	D
2. STREET ADDRESS	PLATON, STELLA
3. CITY, STATE, ZIP	11549 B SW 109 RD
	MIAMI FL
4. NAME	
5. STREET ADDRESS	
6. CITY, STATE, ZIP	
7. NAME	
8. STREET ADDRESS	
9. CITY, STATE, ZIP	
10. NAME	
11. STREET ADDRESS	
12. CITY, STATE, ZIP	
13. NAME	
14. STREET ADDRESS	
15. CITY, STATE, ZIP	
16. NAME	
17. STREET ADDRESS	
18. CITY, STATE, ZIP	

13. ADDITIONAL CHANGES TO OFFICIAL RECORDS

1. NAME	☐ Change ☐ Addition
2. STREET ADDRESS	
3. CITY, STATE, ZIP	
4. NAME	☐ Change ☐ Addition
5. STREET ADDRESS	
6. CITY, STATE, ZIP	
7. NAME	☐ Change ☐ Addition
8. STREET ADDRESS	
9. CITY, STATE, ZIP	
10. NAME	☐ Change ☐ Addition
11. STREET ADDRESS	
12. CITY, STATE, ZIP	
13. NAME	☐ Change ☐ Addition
14. STREET ADDRESS	
15. CITY, STATE, ZIP	
16. NAME	☐ Change ☐ Addition
17. STREET ADDRESS	
18. CITY, STATE, ZIP	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.032, Florida Statutes. I further certify that the information is included on this filing as requested 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 person or persons empowered to execute this report as required by Chapter 199, Florida Statutes, and that my name appears in Block 12 or Block 13 of this filing as the registered agent or director with an address.

SIGNATURE:

Platon Stella

5/4/95

594-2012

(Signature and Typed or Printed Name of Signing Officer or Director)