## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999

1. Corporation Name

DOCUMENT # \$39472



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## Jan 25, 1999 8:00 am Secretary of State

01-25-1999 90043 006 \*\*\*150.00

A-JACK	CLEANING SERVICES, IN	IC.							
		•				\$ 100 HB (6 100 HB (6 10 10 10 10 10 10 10 10 10 10 10 10 10			<b>\$</b>    <b>\$</b>    <b>\$</b>
									<b>i</b> ii iiii iii
Principal Plac	e of Business	Mailing Address					(# 1101 DIBII DI	QJI BIBLI BJBIL DI	B   B B   1001
2960 LOLISSA LANE 2960 LOLISSA LANE									
MAITLAND FL 32751 MAITLAND FL 32751									
US US						DO NOT WRIT	E IN THIS	SPACE	
						3. Date Incorporated or Qualifed			
						03/20/1991			
Principal Place of Business Za. Mailing Address						4. FEI Number		Арг	lied For
21		26				59-3056918		Not	Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.						5. Certifcate of Status Desired		\$8.75 A	II
27						5. Germonic of Status Busined		Fee Red	quired
City & State City & State					_	6. Election Campaign Financing		\$5.00	May Be
23	_	28				Trust Fund Contribution		- Added to	Fees
Zip	Country	Zip	Cour	ntry		8. This corporation owes the curre	ent year Inta		
24	25 29		30			Personal Property Tax.			□No
	9. Name and Address of Cur	rent Registered Agent				10. Name and Address of New R	egistered /	Agent	
	r 2000ioi			81	Name				
	K BOOGICH			82	Street Addre	ess (P.O. Box Number is Not Accepta	ble)	·	-
2060 LOLISSA LANE SUITE 101									
				83					
MAI	TLAND FL 32751		}	84	Cit		<del></del>	85 Zip C	ode
				84	City		FL	105 Zip C	ode
11. Pursuant	to the provisions of Sections 607.0	0502 and 607.1508, Florida Statu	ites, the at	oove	e-named corpo	pration submits this statement for the	purpose of	changing its	egistered
office or r	registered agent, or both, in the Sta im familiar with, and accept the obl	ate of Florida. Such change was	authorized	by i	the corporation	n's board of directors. I hereby accep	t the appoir	itment as reg	istered
	•	igations of, occion out.coos, in	orida otate		•				
SIGNATURE	Signature, typed or printed name of registered	agent and title if applicable. (NOT	E: Registered	Agen	t signature required	when reinstating)	DATE		
12.		AND DIRECTORS	13.			ADDITIONS/CHANGES TO OF	ICERS AN	D DIRECTO	RS IN 12
TITLE	P	☐ DELETE	1.1 TH	LΕ				Change	☐ Addition
NAME	BOOGISH, JACK L		1.2 NA	ME					
STREET ADDRESS	1960 LOLISSA LANE		1.3 ST	REET	ADDRESS				
CITY-ST-ZIP	MAITLAND FL		1.4 CR	Y-ST	T-ZIP				
TITLE	V	☐ DELETE	2.1 TIT					Change	Addition
NAME	BOOGICH, MARIA E.		2.2 NA	ME					
STREET ADDRESS	2960 LOLISSA LANE		23 ST	REET	ADDRESS				
i	MAITLAND FL		2.4 CI						
CITY-ST-ZIP		☐ DELETE	3.1 TIT					Change	Addition
NAME	1	, =	3.2 NA						_
STREET ADDRESS		i			ADDRESS				ĺ
	.*		3.4. Cf						Į
CITY-ST-ZIP TITLE		☐ DELETÉ	4.1 TIT		1-41			Change	Addition
		- Detelo							_
NAME			4. 2 NA					,	
STREET ADDRESS					ADDRESS	•			
CITY-ST-ZIP		☐ DELETE	4.4 CIT		1-414			Change	Addition
TITLE			5.1 III 5.2 NA						
NAME	,				T ADDOESS				
STREET ADDRESS	-			KEE	ADDRESS				·
CITY-ST-ZIP			■ 54 Cl1	n,					
TITLE				TY-ST	1-219			Change	□ Addition
		☐ DELETE	6.1 TIT	LE	1-218			Change	Addition
NAME	±	☐ DELETE	6.1 TIT 6.2 NA	LE ME	I-ZIP			☐ Change	☐ Addition

CITY-ST-ZIP 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:

JACK Boog, it 1/6/99 407-740-5726