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

**PROFIT CORPORATION ANNUAL REPORT** 

**19**98



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(8)

SONRISE CLEANING SERVICE, INC.

**FILED** May 11 1998 8:00am Secretary of State



Principal Place of Business Mailing Address				,		DIONI OFONI ENGAL OLOGY NOVE
4736 LEACOCK COURT 4736 LEACOCK COUP				P4.1		
<b>ORLANDO</b> FL	. 32817	ORLANDO FL 32817		DO NOT WRITE IN TH	IC CDACE	
					3. Date Incorporated or Qualified	IS SI ACE
					07/17/1991	
2. Principal Pl	ace of Business	2a. Mailing Address		4, FEI Number	Applied For	
21		26		59-3062483	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
22		27		6. Certificate of Status Desired	Fee Required	
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
23		Zip Country		Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	<b>├</b> ┐	ıtry	8. This corporation owes or has paid the	
24	25 29 30  9. Name and Address of Current Registered Agent		30		Personal Property Tax due June 30.  10. Name and Address of New Registere	
la l					10. Hallo alla Madico di Holl Hogicion	- Trigotti
PETIT, HENRY P. JR. 4736 LEACOCK COURT			-			
	HANDO FL 32817		['	Street Add	dress (P.O. Box Number is Not Acceptable)	
<b>O</b>	LOGICO I C OLO II		ļī	33		*,
			ļ.	B4 City		Inc. 7in Codo
			["	B4 City	F	85 Zip Code
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 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE						
<del></del>	Signature, typed or printed name of registered.	agent and title if applicable. (NOTE NO DIRECTORS		Agent signature requ	uired when reinstating) DATI	
12.	DETICE IS P	NO DIRECTORS 13.		e I	ADDITIONS/CHANGES TO OFFICERS A	Change Addition
NAME	PETIT, HENRY P., JR.	L. Dittil	1.2 NAM	- 1		
STREET ADDRESS	4744   7444 AA44 AT			EET ADDRESS		
CITY-ST-ZIP	ANIALISA EL			/-SI-ZIP		
TITLE		DELETE	2.1 TITL			Change Addition
NAME	PETIT, ELLEN M.		2.2 NAM	AE		
STREET ADDRESS	4736 LEACOCK CT. 231		2.3 STR	EET ADDRESS		
CITY-ST-ZIP	ORLANDO FL		2.4 011	Y-ST-ZIP		
TITLE		DELETE 3.1		E		Change Addition
NAME	1		3.2 NAM	AE		
STREET ADDRESS				EET ADDRESS		
CITY-ST-ZIP		D DOLLTE		Y-ST-ZiP		Change Addition
TITLE		DELETE	4.1 TITU 4.2 NA			Change Addition
NAME CTOSET ADDRESS				ľ		1
STREET ADDRESS CITY-ST-ZIP				EET ADDRESS (-ST-ZIP		
TITLE		DELETE	5.1 181			Change Addition
NAME		<del></del>	5.2 NAM			
STREET ADDRESS			•	EET ADDRESS		
CITY-ST-ZIP				(-ST-71P		ļ
TITLE		DELETE 61				Change Addition
NAME			6 2 NAN	<b>N</b> E		j
STREET ADDRESS			63STR	EET ADDRESS		
				r-ST-ZIP		
14 I hereby c	orlify that the information supplied	with this filing done not qualify for	r the ever	nntion stated in	n Section 119 07/3)(i) Florida Statutes, i further	certify that the information

Indicated on this annual report or suppliemental 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.