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

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # \$73250

(0)

Mailing Address

P & P PROPERTY MAINTENANCE, INC.

10790 SW 44TH ST MIAMI FL 33165 US			10790 SW 44TH ST MIAMI FL 33165-4837 US								
			••					3. Date Incorporated or Qualified 08/12/1991	1	ate of Last P 25/1996	Report
2. Principal Place of Busiress			2a. Mailing Address					4. FEI Number		Ar	oplied For
21			26					65-0277811		No	ot Applicable
Suite, Apt. #. etc			Suite Apt. #, etc.					5. Certificate of Status Desired		\$8.75	Additional
22			27					S. Cermicate of Gratus Desired		Fee Re	equired
City & State			City & State					6. Election Campaign Financing		\$5.00	May Be
23			28				Trust Fund Contribution				
Ζφ	} ···₁				Counti	У		8. This corporation has liability for i			. 199.032,
24 25 9, Name and Address of Current			29 30			Florida Statutes Yes No					
		adress of Current H	registered Agen	17	0.	-	Nome	10. Name and Address of New Re	gistered .	Agent	
	O, KELLY		81 Name								
10790 SW 44TH ST. Miami FL 33165				82 Street Addr			ress (P.O. Box Number is Not Acceptab	le)	•		
					8:	3					
					84	1	City		FL	85 Zip	Code
11. Pursuant l	to the provisions of	Sections 607 0502 a	ind 607, 1508. Fle	orida Statutes	s, the abo	ve-	named corp	poration submits this statement for the p	urnose of	changing it	ts registered
office or n	egistered agent, or m familiar with land	both, in the State of Faccept the obligation	Florida Such ch ins of Section 60	iange was au 07.0505, Elori	rthorized t ida Statute	y t	he corporat	tion's board of directors. I hereby accep	it the app	ointment as	registered
_				3. 0300,113.	icici Oldibii	,					
SIGNATURE	Signature Applicator process	in exercise propertisped a	ad fille 2 approvable	(f _v OTE	Prostered A	gent	signature requir	red when reinstating)	DATE		
12.		OFFICERS AND I	DIRECTORS		13.			ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTOR	RS IN 12
Title	P			DELETE	1.1 TOTLE					☐ Change	Addition
NAME	MAYO, KELLY				1.2 NAME						
STREET ADDRESS	10790 SW 44T	H ST			1.3 STREE	ET AS	DORESS				
CITY - S1 - 20°	MIAMI FL				14 CITY-	ST-	ZIP				
TITLE				DELETE	2 1 TITLE					Change	Addition
NAME					2.2 NAME						
STREET ADDRESS					23 STREE	T A	DDRESS				
CITY - ST - ZIP					2 4 CITY	- 51	- ZIP				
TILLE				DELETE	3 1 TITLE	•				☐ Change	Addition
NAMÉ					3.2 NAME						
STREET ADDRESS					3.3 STREE	T AI	DDRESS				
CITY - ST - ZIP					3.4. CITY	-ST	ZIP				
TITLE				DELETE	4 1 TITLE					Change	Addition
NAME					4 2 NAM	E					
STREET ADDRESS					4 3 STREE	TA	DDRESS				
CITY-S1-7IP					4.4 CHY-	ST-	ZIP				
lit.F				DEFELF	5 1 TITLE				********	Change	Addition
NAME					52 NAME						
STREET ADDRESS					5.3 STREE	T A	DDRESS				
City \$1-7iP	•				5.4 City-	ST-	ZIP				
THEF				DELETE	6 1 TITLE					Change	Addition
NAME					6.2 NAME					-	
STREET ADDRESS					63 STREE		DDAESS				
CITY C1 710					C 4 000V	CT.	7/0				

14. I do hereby ccrt by 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 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.

SIGNATURE

SIGNATURE AND TYPED OR PHINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/3/97

(305) 880 - 7692

FILED

Jan 14 1997 8:00am

Secretary of State

0222495