**PROFIT** CORPORATION. 45 ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # **S77529**

1. Corporation Name

ROBAR CLEANING, INC.

•					
Principal Place of Business. : Mailing Address					i idalidit iti (1001 tatal alisa libia alah dian alah asah alah alah alah alah alah alah
306 DALY DR JUPITER FL 334 US	68	306 DALY DR JUPITER FL 33548 US			DO NOT WRITE IN THIS SPACE
03		•			3. Date Incorporated or Qualifed
					08/28/1991
2. Principal Place of Business 2a. Mailing Address					4. FEI Number Applied For
21		26			65-0281866 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired  \$8.75 Additional
		27			Fee Required
City & State	, ,	City & State			6. Election Campaign Financing \$5.00 May Be
23		28	- Country		Trust Fund Contribution Added to Fees
Zip Country		Zip	Zip Country		8. This corporation owes the current year Intangible  Personal Property Tax  Personal Property Tax
24	25]		0		Personal Property Tax.
	9. Name and Address of Currer	it Registered Agent	81	Name	10. Name and Address of New Regional of Agent
RARI	RETT, JAMES H.	•			
	DALY DR	• •	82	Street Add	dress (P.O. Box Number is Not Acceptable)
	TER FL 33458		83		· · · · · · · · · · · · · · · · · · ·
	IEN I E 30430		"		The state of the s
	•		84	City	E∎ 85 Zip Code
100,000	007.050	00 CO7 4500 Florida Statutos	the above	no named car	rporation submits this statement for the purpose of changing its registered
office or re	egistered agent, or both, in the State	of Florida. Such change was auti	norized by	the corporat	tion's board of directors. I hereby accept the appointment as registered
agent. I a	m familiar with, and accept the obliga	ations of, Section 607.0505, Florid	a Statute:	š.	
SIGNATURE	*				red when reinstating) DATE
12.	Signature, typed or printed name of registered age	ND DIRECTORS	13.	nt signature requir	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P\$	DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	BARRETT, JAMES H.	_	1.2 NAME		
STREET ADDRESS	306 DALY DRIVE		B .	T ADDRESS	
	JUPITER FL		1,4 CITY-S		
CITY-ST-ZIP TITLE	VT	☐ DELETE	2.1 TITLE	,	Change Addition
NAME	ROBERTS, RONALD G. SR		2.2 NAME	1	
STREET ADDRESS	5357 EAGLE LAKE DRIVE			TADORESS	
CITY-ST-ZIP	PALM BCH GRDS FL	, ,	2.4 CITY-		
TITLE	FALM DOTT GITDOTE	☐ DELETE	3.1 TITLE	· · · · · ·	☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREE	T ADDRESS	
CITY-ST-ZIP			3,4. CITY-	ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREE	TADORESS	
CITY-ST-ZIP	•		4.4 CITY-5	ST-ZIP	
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Additio
NAME			5.2 NAME		•
STREET ADDRESS			5.3 STREE	T ADDRESS	
CITY-ST-ZIP	•		5.4 CITY-	ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Additio
NAME .			6.2 NAME	-	
STREET ADDRESS			6.3 STREE	TADDRESS	
CITY-ST-ZIP			6.4 CITY-	ST-ZIP	

SIGNATURE:

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 of 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.

Apr 21, 1999 8:00 am Secretary of State

04-21-1999 90221 014 \*\*\*150.00