

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Montemayor
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY -1 PM 3:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **S81304** (5)

1. Corporation Name

M.E. MAINTENANCE INC.

Principal Place of Business

**3671 N.W. 50TH STREET
MIAMI FL 33142-3903**

Mailing Address

**3671 N.W. 50TH STREET
MIAMI FL 33142-3903**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **09/19/1991** 3a. Date of Last Report **05/01/1994**

4. FEI Number **65-0287688** Applied For ☐ Not Applicable ☐

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**

8. This corporation has liability for ad valorem tax under § 190.042 Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

24 State

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

29 State

9. Name and Address of Current Registered Agent

**CABRERA, MARIA E.
3671 N.W. 50TH STREET
MIAMI FL 33145**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0602 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 607.0605, Florida Statutes.

SIGNATURE

(Signature of person who is authorized to sign on behalf of the corporation)

(Signature of person who is authorized to sign on behalf of the corporation)

12. OFFICERS AND DIRECTORS

TITLE	PST
NAME	CABRERA, MARIA E.
STREET ADDRESS	3672 N.W. 50TH ST.
CITY, ST., ZIP	MIAMI FL
TITLE	D
NAME	CABRERA, MARIA E.
STREET ADDRESS	3672 N.W. 50TH ST.
CITY, ST., ZIP	MIAMI FL
TITLE	
NAME	
STREET ADDRESS	
CITY, ST., ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST., ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST., ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY, ST., ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY, ST., ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY, ST., ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY, ST., ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY, ST., ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY, ST., 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 3.15 (07/000) Florida Statutes. I further certify that the information included 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. I am an officer or director of the corporation or the receiver or liquidator empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 1, 2 or Block 3 of this report, or on an attachment with an address.

SIGNATURE:

Maria E. Cabrera
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-24-95

635-1355