

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

0230339

FILED
Feb 22, 1999 8:00 am
Secretary of State

02-22-1999 90003 001 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # V05033

1. Corporation Name

LOUIS, MAINTENANCE AND SERVICES, INC.

Principal Place of Business

15410 SW 109 AVE
MIAMI FL 33157
US

Mailing Address

15410 SW 109TH AVE.
MIAMI FL 33157

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/08/1992

4. FEI Number

65-0305401

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 15410 S.W 109 ave

Suite, Apt. #, etc.

22 MIAMI FL

City & State

23 33157

Zip

Country

24

25

2a. Mailing Address

26 15410 S.W 109 ave

Suite, Apt. #, etc.

27 MIAMI FL

City & State

28 33157

Zip

Country

29

30

9. Name and Address of Current Registered Agent

ROMERO, LUIS F.
15410 SW 109TH AVE.
MIAMI FL 33157

10. Name and Address of New Registered Agent

81 Name Luis F. Romero

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

15410 S.W 109 ave

83

84

City MIAMI

FL

85 Zip Code

33157

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

1-3-98

12. OFFICERS AND DIRECTORS

TITLE S ☐ DELETE

NAME ROMERO, LUIS F.
STREET ADDRESS 15410 SW 109TH AVE.
CITY-ST-ZIP MIAMI FL 33157

TITLE T ☐ DELETE

NAME ROMERO, LUIS
STREET ADDRESS 15410 SW 109 AVE
CITY-ST-ZIP MIAMI FL 33157

TITLE Romero, Luis ☐ DELETE

NAME 15410 S.W 109 ave P
STREET ADDRESS MIAMI FL 33157
CITY-ST-ZIP

TITLE Romero, Luis ☐ DELETE

NAME 15410 S.W 109 ave V
STREET ADDRESS MIAMI FL 33157
CITY-ST-ZIP

TITLE ☐ DELETE

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 N/A

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME N/A

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME N/A

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME N/A

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 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-3-99 305-262-41
04

CR2E034 (11/98)