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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # V24048 (3) 1. Corporation Name EXTERNAL MAINTENANCE, INC.				I JEBNI BINDIN JIBNI GIRDI BONIN BIRBA	I JOH ONEK BIOK OLEM BIEK OLEK BIOK DIOK
Principal Place of Business 1645 KENSINGTON COURT FT MYERS FL 33907 US		Mailing Address 1645 KENSINGTON COURT FT MYERS FL 33907 US			
				 Date Incorporated or Qualified 03/23/1992 	3a. Date of Last Report 04/28/1995
Principa! Place of Business Total		2a. Mailing Address 26		4. FEI Number 65-0393134	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be
Zip	Country 25	Z _i p	Country 30	This corporation has liability for in Florida Statutes Yes	•
	9. Name and Address of Current			10. Name and Address of New R	
MULAC, ERMA 3091 SHELL MOUND BOULEVARD FT MYERS BEACH FL 33932 81 Name 82 Street Addre				APRIL LUTZ ess IP.O. Box Number is NoyAcceptal, 655 Wake nold	le)
			84 City	1/1	85 Zip Code
11. Pursuant to	o the provisions of Sections 607.0502 a	and 607,1508, Florida Statut	es, the above-named coroor	ation submits this statement for the pur	Pose of changing its registered office
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation shows 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 tite 1 applicable (NOTE: Registered Agent Signature Paired when reinstating) DATE					
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFI	
TITLE	AUDENIOU 7 EDIO	☐ DELETE	1. 1 THLE		Change Addition
NAME	AHRENHOLZ, ERIC 1645 KENSINGTON CT		1.2 NAME		
STREET ADDRESS	FT MYERS FL		1.3 STREET ADDRESS		
CITY-ST-ZIP	11 MILIOIL	C DOLLIN	1.4 CITY - ST - ZIF*		
TITLE NAME		☐ DELETE	2 1 TITLE		Change Addition
STREET ADDRESS			2.2 NAME		
CITY-ST-ZIP			2.3 STREET ADDRESS		
TITLE		☐ DELETE	2.4 CITY - ST - ZIP 3. 1 TITLE		Change Addition
NAME			3.2 NAME		Addition
STREET ADDRESS			3.3 STREET ADDRESS		:
CITY-ST-ZIP			3.4 CITY- \$1-ZIP		į
TITLE		DELFTE	4. 1 TITLE		Change Add-tion
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY+ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		DELETE	5 1 TITLE		Change Addition
NAME			5 2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		İ
CITY-ST-ZIP TITLE	AMALO	[T] DELETE	54 CITY-ST-ZIP		
NAME		☐ DELETE	6 1 TITLE		Change Maddition
STREET ADDRESS			6.2 NAME		
CITY-ST-ZIP			6.3 STREET ADDRESS		
14. I do hereby	certify that the information supplied wi	th this filing is voluntarily furn	64 C/TY - ST - ZIP ished and does not qualify for	or the exemption stated in Section 119.0	07(3)(k), 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 t 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. Abrenholz 4/29/96 941 275 8266

And Typed or Printed Name of Signing Officer or Director

Date

SIGNATURE: