FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE

APPROVED AND FILED

95 MAY -1 PM 9:37

SECRETARY OF STATE TALLAHASSEE, FLORIDA

DOCUMENT # V33018 (5)

1. Corporate Name

LOYALTY JANITORIAL SERVICES, INC.

Principal Place of Business	Mailing Address
1800 LYNWOOD CT WEST PALM BEACH FL 33415	1800 LYNWOOD CT WEST PALM BEACH FL 33415

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified: 05/01/1992

3a. Date of Last Report: 04/20/1994

4. FEI Number: 65-0329028 — 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. Florida Statute ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

LEAL, FRANK T.
1800 LYNWOOD CT
WEST PALM BEACH FL 33415

10. Name and Address of New Registered Agent

Name

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

City FL Zip Code

11. Pursuant to the provisions of sections ... 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 ... Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	LEAL, FRANK T.
STREET ADDRESS	1800 LYNWOOD CT
CITY-ST-ZIP	WEST PALM BEACH FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(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 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: Frank Leal / FRANK T LEAL (Pres) 4/30/95

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date

0253104 CP