FILED Apr 15, 1999 8:00 am Secretary of State

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **V36576**

1. Corporation Name

NAME

CITY-ST-ZIP- .

SIGNATURE:

图10人名第二

ACTION JANITORIAL SERVICES, INC.

Principal Place	of Business	Mailing Address								
4000 N. STATE	ROAD 7	4000 N. STATE ROAD 7								
SUITE 408-A		SUITE 408-A				DO NOT WRITE IN THIS SPACE				
LAUDERDALE L	AKES FL 33319	LAUDERDALE LAKES FL 33319				3. Date Incorporated or Qualifed				
						05/18/1992				
					_	4. FEI Number		Ann	lied For	
·	ace of Business	2a. Mailing Address				65-0334050	\vdash		Applicable	
21		26 Suite Apt # etc			_	\$8.75 Additional				
Suite, Apt. a	≠, etc.	Suite, Apt. #, etc.			İ	5. Certificate of Status Desired				
22]	<u> </u>	City & State			<u> </u>					
City & State	, ,	City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
23	0	Zip Country								
····	Zip Country Zip			,		8. This corporation owes the current year Intangible Personal Property Tax.				
24	25	29 30			_	10. Name and Address of New Registere				
	9. Name and Address of Curren	t Registered Agent	81	Ns	ame	IV. Name and Address of New Rogisters				
RUS	CH, SCOTT A.			1						
	N. STATE ROAD 7		82 S			ss (P.O. Box Number is Not Acceptable)*			Ì	
			-	.					——	
	E 408-A		83	']					}	
LAUL	DERDALE LAKES FL 33319		84	l Ci	itv		85	Zip C	ode	
	•				-		<u> </u>			
office or re	to the provisions of Sections 607,050 egisterad agent, or both, in the State n familiar with, and accept the obliga	of Florida. Such change was autho	orized by	/ tne (corporation	ration submits this statement for the purpose o's board of directors. I hereby accept the app	ointment	as reg	istered	
SIGNATURE						when reinstating) DATE			\	
	Signature, typed or printed name of registered age	ID DIRECTORS	13.	nt sign	attie ledakeo (when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS	ND DIR	ECTOR	RS IN 12	
12.		DELETE	1.1 TITLE			ADDITIONO/OFFICE CO. TO ST. TO ELLO	Ch		Addition	
TITLE	PT BUSCH, SCOTT		1.2 NAME				_	-	_	
NAME										
STREET ADDRESS			1.3 STREET ADDRESS				•			
CITY-ST-ZIP	LAUDERDALE LAKES FL	[7] pri etr	1.4 CITY-5	3T-ZIP	'		Ch	ance	Addition	
TITLE	VPS	☐ DELETE	2.1 TITLE					arigo		
NAME	BUSCH, KAREN		2.2 NAME					•	}	
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NAME	•		3.2 NAME							
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CITY-ST-ZIP	•		3.4, CITY-	ST-ZIP	- <u> </u>					
TITLE		☐ DELETE	4.1 TITLE		_		□ Ch	ange	☐ Addition \	
NAME			4. 2 NAME	Ė						
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CITY-ST-ZIP	,		4.4 CITY-5	ST-ZIP	,					
TITLE		☐ DELETE	5.1 TITLE				☐ Ch	nange	Addition	
NAME		_	5.2 NAME							
STREET ADDRESS		.j	5.3 STREE	ET ADD	RESS				,	
			5.4 CITY-5	ST-ZIP	,					
CITY-ST-ZIP		☐ DELETE	6.1 TITLE		_			nange	Addition	
110E F.77	为此为是"对路"中,第1世		6.2 NAME	:			_	-		

6.2 NAME

14. I hereby certify that the information supplied with his 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 rule 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 employeed 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 the address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP