Feb 24, 1999 8:00 am Secretary of State

02-24-1999 90052 018 ***150.00

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 # V39782 1. Corporation Name PATTERSON CLEANING & GENERAL MAINTENANCE, INC.				
Principal Place	e of Business	Mailing Address		(1881) Bitann littis Inbitt Jenn ifnin arnit
8531 NW 52 CT		8531 NW 52 CT		
SUNRISE FL 33		SUNRISE FL 33351		· "
US	= -	us		DO NOT WRITE IN THIS SPACE
				 Date Incorporated or Qualified 05/27/1992
2. Principal Pl	ace of Business	2a. Mailing Address	•	4. FEI Number Applied For
21		26		65-0342628 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional
22		27		5., Certificate of Status Besired Fee Required
City & State		City & State		6. Election Campaign Financing \$5.00 May Be
23		28		Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year Intangible
24	25	29	30	Personal Property Tax.
<u>1</u>	9. Name and Address of Currer			10. Name and Address of New Registered Agent
8515 SUNI	t, yvonne n w 20th Court Rise FL 33322		83 84 City	Address (P.O. Box Number is Not Acceptable) FL 85 Zip Code corporation submits this statement for the purpose of changing its registered
office or re agent. I an SIGNATURE	egistered agent, or both, in the State m familiar with, and accept the obliga Signature. typed or printed name of registered age	of Florida. Such change was autitions of, Section 607.0505, Florid	thorized by the corpo	oration's board of directors. I nereby accept the appointment as registered
TITLE	0	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	JOHN PATTERSON		1.2 NAME	,
	7210 NW 44TH COURT		1.3 STREET ADDRESS	8531 NW52 COURT SURRISE FL 33351
STREET ADDRESS				Sugar 5/ 222 51
CITY-ST-ZIP	LAUDERHILL FL	□ DELETE	1.4 CITY-ST-ZIP	Change Addition
TITLE		L. DELETE	2.1 TITLE	
NAME			2.2 NAME	
STREET ADDRESS			2.3 STREET ADDRESS	
CITY-ST-ZIP			2. 4 CITY-ST-ZIP	
TITLE		☐ DELETE	3.1 TITLE	Change Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4. CITY-ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	·
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
TITLE		☐ DELETE	5.1 TITLE	☐ Change ☐ Additio
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
			5.4 CITY-ST-ZIP	·
CITY-ST-ZIP TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Additio
		L. 0202.2	6.2 NAME	
NAME			6.3 STREET ADDRESS	·
STREET ADDRESS				
CITY-ST-ZIP			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 of suppliemental 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 1 if changes, or or an attachment with an address, with all other like empowered.

SIGNATURE

WE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-15-99

954746 BSYZ