FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham **ANNUAL REPORT** Secretary of State **1998 DIVISION OF CORPORATIONS** DOCUMENT # 1. Corporation Name (7)FLORIDA AIR CLEANING SERVICES, INC.

FILED Apr 20 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					- 1 18011 OLIDAL OLIUL ODLIG 18181 OLIUL OAI	/	fill bla tt lødt	
4808 VESPASIAN COURT LAKE WORTH FL 33463 LAKE WORTH FL 33463					DO NOT WRITE	IN THIS SPACE		
					3. Date Incorporated or Qualified			
9 Principal C	Place of Puninger	Tot Mainta Addition			07/13/1992			
2. Principal Place of Business		2a. Mailing Address			4. FEI Number		Applied For	
Suite, Apt, #, etc.		Suite, Apt, #, etc.	Suite Ant # etc		65-0350082	60 7E	lot Applicable	
27				5. Certificate of Status Desired	1 7 7 7 7	Additional Required		
City & State		City & State			6. Election Campaign Financing	······		
23		28			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip	Country Zip		Country	8. This corporation owes or has paid the current year Intangible				
24	25 29 30		30	Personal Property Tax due June 30. Yes No				
	9. Name and Address of Cur	rent Registered Agent	81		10. Name and Address of New Re-	gistered Agent		
1	RKER, JAMES		61	Name	•			
1	08 VESPASIAN COURT		82	Street Addre	ess (P.O. Box Number is Not Acceptab	le)		
LAKE WORTH FL 33463			83					
							i	
			84	City		FL 85 Zip	Code	
11. Pursuant	to the provisions of Sections 607.0	0502 and 607.1508, Florida Statu	tes, the above-	named corpo	oration submits this statement for the p	urnoso of changing	its registered	
Office of r	egistered agent, or both, in the St m familiar with, and accept the ob	ale of Horida. Such change was	authorized by t	he corporation	on's board of directors. I hereby accep	t the appointment as	registered	
SIGNATURE			onda Otalalog.				ĺ	
SIGNATORE	Signature, typod or printed name of registered		1t: Registered Agent	signature require	d when reinstating)	DATE		
12.			13.		ADDITIONS/CHANGES TO OFFIC	· · · · · · · · · · · · · · · · · · ·		
TITLE	D SARVED IAMES	DELETE 1.1 T				L. Change	Addition	
NAME	111111111111111111111111111111111111111		1.2 NAME					
STREET ADDRESS	4608 VESPASIAN COURT LAKE WORTH FL		1.3 STREET A				į i	
CITY-ST-ZIP TITLE			1.4 CITY-ST- 2.1 TITLE	ZIP		Change	Addition	
NAME			2.2 NAME	i		Change	Auguliosi	
STREET ADDRESS			2.3 STREET AS	nnaree				
CITY-ST-ZIP			2.4 CITY-ST-					
TITLE	DELETE		3.1 TITLE			☐ Change	Addition	
NAME			3.2 NAME					
STREET ADDRESS			3.3 STREET AL	DDRESS			, -	
CITY-ST-ZIP			3.4. CITY - ST-	ZIP				
TITLE	☐ DELETE 4.1		4.1 TITLE			Change	Addition	
NAME			4. 2 NAME					
STREET ADDRESS			4.3 STREET AL	XORESS				
CITY-ST-ZIP			4.4 CITY - ST-	ZIP				
TITLE		DELETE 5.1				Change	☐ Addition	
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREET AD	ľ				
CITY-ST-ZIP	~ _	DELETE	5.4 C(TY - ST -)	ZIP		——————————————————————————————————————	1 4	
TITLE		LI DELETE	6.1 TITLE			Change	☐ Addition	
NAME CTREET ADDRESS			6.2 NAME	NODE OF				
STREET ADDRESS			6.3 STREET AD					
Crity+St-ZIP			6.4 CITY - ST-2	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 chapted, or on an attachiment with an address.