

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

**PROFIT
CORPORATION
ANNUAL REPORT
1996**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V59176 (0)

1. Corporation Name

C & S JANITORIAL SERVICE UNLIMITED, INC.



Principal Place of Business

**4703 MUSKOGEE CT. #6
TAMPA FL 33610
US**

Mailing Address

**4703 MUSKOGEE CT. #6
TAMPA FL 33610
US**

3. Date Incorporated or Qualified

08/20/1992

3a. Date of Last Report

05/01/1995

2. Principal Place of Business

2a. Mailing Address

21 1402 Thistle-down Drive

26 1402 Thistle-down Drive

4. FCI Number

59-3133104

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Brandon FLA

27 Brandon FLA

City & State

City & State

23 33510

28 33510

Zip

Country

Zip

Country

24 25 US

29 30 US

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. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**GILMORE, RICARDO L.
610 WEST HORATIO ST.
TAMPA FL 33606**

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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, Section 607.0505, Florida Statutes.

SIGNATURE

Signature (typed or printed name of registered agent or officer or director)

DATE Registered Agent's Signature (typed or printed name)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE

**DC
CURRY, LULA
4703 MUSKOGEE CT. #6
TAMPA FL**

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE

**DCP
DONALDSON, DORIS
5508-86 STREET
TAMPA FL 33619**

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE

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13. ADDITIONS-CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP ☒ Change ☐ Addition

**1402 Thistle-down Drive
Brandon FLA 33510**

2.1 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP ☐ Change ☐ Addition

3.1 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP ☐ Change ☐ Addition

4.1 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP ☐ Change ☐ Addition

5.1 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP ☐ Change ☐ Addition

6.1 TITLE 62 NAME 63 STREET ADDRESS 64 CITY-ST-ZIP ☐ Change ☐ Addition

7.1 TITLE 72 NAME 73 STREET ADDRESS 74 CITY-ST-ZIP ☐ Change ☐ Addition

8.1 TITLE 82 NAME 83 STREET ADDRESS 84 CITY-ST-ZIP ☐ Change ☐ Addition

9.1 TITLE 92 NAME 93 STREET ADDRESS 94 CITY-ST-ZIP ☐ Change ☐ Addition

10.1 TITLE 102 NAME 103 STREET ADDRESS 104 CITY-ST-ZIP ☐ Change ☐ Addition

11.1 TITLE 112 NAME 113 STREET ADDRESS 114 CITY-ST-ZIP ☐ Change ☐ Addition

12.1 TITLE 122 NAME 123 STREET ADDRESS 124 CITY-ST-ZIP ☐ Change ☐ Addition

13.1 TITLE 132 NAME 133 STREET ADDRESS 134 CITY-ST-ZIP ☐ Change ☐ Addition

14.1 TITLE 142 NAME 143 STREET ADDRESS 144 CITY-ST-ZIP ☐ Change ☐ Addition

15.1 TITLE 152 NAME 153 STREET ADDRESS 154 CITY-ST-ZIP ☐ Change ☐ Addition

16.1 TITLE 162 NAME 163 STREET ADDRESS 164 CITY-ST-ZIP ☐ Change ☐ Addition

17.1 TITLE 172 NAME 173 STREET ADDRESS 174 CITY-ST-ZIP ☐ Change ☐ Addition

18.1 TITLE 182 NAME 183 STREET ADDRESS 184 CITY-ST-ZIP ☐ Change ☐ Addition

19.1 TITLE 192 NAME 193 STREET ADDRESS 194 CITY-ST-ZIP ☐ Change ☐ Addition

20.1 TITLE 202 NAME 203 STREET ADDRESS 204 CITY-ST-ZIP ☐ Change ☐ Addition

21.1 TITLE 212 NAME 213 STREET ADDRESS 214 CITY-ST-ZIP ☐ Change ☐ Addition

22.1 TITLE 222 NAME 223 STREET ADDRESS 224 CITY-ST-ZIP ☐ Change ☐ Addition

23.1 TITLE 232 NAME 233 STREET ADDRESS 234 CITY-ST-ZIP ☐ Change ☐ Addition

24.1 TITLE 242 NAME 243 STREET ADDRESS 244 CITY-ST-ZIP ☐ Change ☐ Addition

25.1 TITLE 252 NAME 253 STREET ADDRESS 254 CITY-ST-ZIP ☐ Change ☐ Addition

26.1 TITLE 262 NAME 263 STREET ADDRESS 264 CITY-ST-ZIP ☐ Change ☐ Addition

27.1 TITLE 272 NAME 273 STREET ADDRESS 274 CITY-ST-ZIP ☐ Change ☐ Addition

28.1 TITLE 282 NAME 283 STREET ADDRESS 284 CITY-ST-ZIP ☐ Change ☐ Addition

29.1 TITLE 292 NAME 293 STREET ADDRESS 294 CITY-ST-ZIP ☐ Change ☐ Addition

30.1 TITLE 302 NAME 303 STREET ADDRESS 304 CITY-ST-ZIP ☐ Change ☐ Addition

31.1 TITLE 312 NAME 313 STREET ADDRESS 314 CITY-ST-ZIP ☐ Change ☐ Addition

32.1 TITLE 322 NAME 323 STREET ADDRESS 324 CITY-ST-ZIP ☐ Change ☐ Addition

33.1 TITLE 332 NAME 333 STREET ADDRESS 334 CITY-ST-ZIP ☐ Change ☐ Addition

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:

Lula Curry
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-30-96 (813) 681-2253
Date Display Phone #

CR2E034 (12/95)