

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

FILED
Apr 16 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # V62392 (8)
1. Corporation Name
INDUSTRIAL FLOOR MAINTENANCE, INC.

Principal Place of Business
9301 NE 6TH AVE.
SUITE C307
MIAMI SHORES FL 33138-2855

Mailing Address
9301 NE 6TH AVE.
SUITE C307
MIAMI SHORES FL 33138-2855



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 09/09/1992	
4. FEI Number 65-0355982	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business		2a. Mailing Address	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.
22	City & State	27	City & State
23	Zip	28	Zip
24	Country	29	Country
25		30	

9. Name and Address of Current Registered Agent
MCCOY, JAMES A JR
8933 PARK DR.
MIAMI SHORES FL 33138

10. Name and Address of New Registered Agent	
81 Name	McCoy, James A. Jr.
82 Street Address (P.O. Box Number is Not Acceptable)	325 NE 96th Street
83	
84 City	Miami Shores
85 Zip Code	FL 33138

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 and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS	
TITLE	PD
NAME	MCCOY, JAMES A JR
STREET ADDRESS	8933 PARK DR.
CITY-ST-ZIP	MIAMI SHORES FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	PD
1.2 NAME	McCoy, James A. Jr.
1.3 STREET ADDRESS	325 NE 96th Street
1.4 CITY-ST-ZIP	Miami Shores, FL 33138
2.1 TITLE	VP
2.2 NAME	McCoy, Anne
2.3 STREET ADDRESS	325 NE 96th Street
2.4 CITY-ST-ZIP	Miami Shores, FL 33138
3.1 TITLE	Director of Installations
3.2 NAME	Martin George
3.3 STREET ADDRESS	320 NW 126th Street
3.4 CITY-ST-ZIP	North Miami, FL 33138
4.1 TITLE	
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	
6.2 NAME	
6.3 STREET ADDRESS	
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 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:

[Handwritten Signature]

4/08/98 (305) 751-7558

CR2E034 (10/97)