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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **V66378**

(3)

1. Corporation Name COMMERCIAL OFFICE CLEANING, INC. Principal Place of Business 6712 CHANT TRAIL TALLAHASSEE FL 32308 1. Corporation Name 6712 CHANT TRAIL TALLAHASSEE FL 32308			6-1702		
				3. Date Incorporated or Qualified 09/24/1992	3a. Date of Last Report 05/01/1996
	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt #, etc		Suite, Apt. #, etc.		59-3144396	Not Applicable
22		27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28	<u>, , , , , , , , , , , , , , , , , , , </u>	Trust Fund Contribution	Added to Fees
2ф 24	Country	Ζιρ 29	Country 30	8. This corporation has liability for in Florida Statutes	ntangible tax under s. 199.032,
[24]	25] 9. Name and Address of Curr		30	10. Name and Address of New Reg	
BEL	LEW, SANDRA D		81 Name		
6712 CHANT TRAIL			82 Street Add	dress (P.O. Box Number is Not Acceptable	le)
TALLAHASSEE FL 32308					
1					
			84 City		FL 85 Zip Code
11. Pursuant office or r agent. La	to the provisions of Sections 607.0 registered agent, or both, in the Stant familiar with, and accept the ob-	502 and 607.1508, Florida Stal ate of Florida. Such change wa ligations of, Section 607.0505,	tutes, the above-named cor is authorized by the corpora Florida Statutes.	poration submits this statement for the pation's board of directors. I hereby accep	urpose of changing Its registered at the appointment as registered
SIGNATURE	Signature spread or printed name of registered	A Control of the Cont	OTE: Registered Agent signature requ	dead when observed	DATE
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	
11/14	D	DELETE	1.1 TITLE		Change Addition
NAME	BELLEW, SANDRA D		1.2 NAME		
STREET ADDRESS	6712 CHANT TRAIL		1.3 STREET ADDRESS		
CHY-ST-7#	TALLAHASSEE FL	DELETE	1.4 City-St-ZiP 2.1 Title		Change Addition
HILE NAME			2.1 TILLE 2.2 NAME		C Griange C Modition
STELL ACCORESS			2.3 STREET ADDRESS		
Cilir-ST ZiP			2. 4 CITY-ST-ZIP		
TITLE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3 3 STREET ADDRESS		ļ
LILE	,	☐ DELETE	3.4. CITY - ST - ZIP 4.1 TITLE		Change Addition
NAME		First Activity	4, 2 NAME		
STECTT ADDRESS			4.3 STREET ADDRESS		
© 1Y+\$1+7/P			4.4 CITY-ST-7IP		
THE:	100	☐ DELETE	5.1 TITLE		Change Addition
NAM/			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CCY+SI+Zi-		DELETE	5 4 CITY-ST-ZIP 61 TITLE		Change Addition
NAME			6.2 NAME		

14. Log 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 office 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.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ASJORESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/97

893-8721

May 05 1997 8:00am

Secretary of State

AA47774