## **2002 UNIFORM BUSINESS REPORT (UBR)**

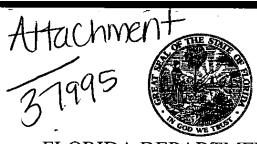
## Jul 08, 2002 8:00 am Secretary of State **DOCUMENT#** L77402 1. Entity Name 05-15-2002 90082 014 \*\*\*150.00 BEST UNIVERSAL CLEANING SERVICES, INC. Principal Place of Business Mailing Address % JEAN FREZIN % JEAN FREZIN 20411 NW 43RD CT 20411 NW 43RD CT MIAMI FL 33055-1206 MIAMI FL 33055-1206 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEi Number Applied For 65-0214203 Not Applicable Zip Country Country \$8.75 Additional -5. Certificate of Status Desired. \_\_ 🔲 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent FREZIN, JEAN Street Address (P.O. Box Number is Not Acceptable) 20411 NW 43RD CT **MIAMI FL 33056** City Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing equirement and elects to do so. After September 13, 2002 Fee will be \$750.00 П Added to Fees Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. ☐ Delete TITLE Change ☐ Addition FREZIN. JEAN M. NAMÉ 20411 NW 43RD CT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI FL CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP -TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

FILED

13. 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 report or supplemental 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 11 or Block 12 if

FOR PROUNIFORM B	OFIT CORPORATI	CN A	٨	1 410
1. Ently Name	77402 (0) SAL CLEANING	/	7 Attac	1 hment
	RITE IN THIS SE			37895
2. Principal Place of Business	3. Mailing Address	Rie Keoria		
Mi AMI TELORIA Zo 33055 COUNTRY	204 ( N:(1)4 City & State M 1944 Cla	3.CT	DO NOT WRITE IN THIS:  4. FEI NUMBER  # 65-0214203	Applied For
	*33055=	Country	& Certificate of Status Desired	\$8.75 Additional
JN THIS	SPACE -	MINM	Box Number is Not Acceptable	2/1/=
SIGNATURE Soften spike or presed normal regular			21/00/90	13055 13055
This corporation is eligible to satisfy its that Tax filing requirement and elects to do so. (See criteria on back)  OFFICERS  OFFICERS		Agent agenture required many files of the control o	10. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees
STREET ADDRESS J. DEL TITO CO. T. ST. SP. MI N-MI E. L.	Tafrezin	M ED/ADRESS		
STREET ADDRESS 20411 N.W.H.	Facail	I a series		CRZEGO4B (1201)
NOVAE STREET ACCREES CITY-ST-EP			DO NOT WRITE	
NAME STREET ADDRESS CITY-ST-OP		emis Tolk	IN THIS SPACE	
NAME STREET ADDRESS GTY-SI-EP RILE	· Spirit		The second of th	
STREET ADDRESS OTT - ST- TP  13. I hereby certify that the information supplied on	internal	Diess:		
13. I hereby certify that the information supplied with this filting does not quality for the exemption stated in Section 119.07(3)(0). Florida Statutes. I hunter certify that the information attachment with an address, with all other like empowered to execute whis report as required by Chapter 507, Florida Statutes; and that my name appears in Block 11 or on an SIGNATURE:				
SPATISTE AND WHEEL OR	PRINTED MANUEL CHARGE CONFICER ON DESICTOR		04/29/2002	

· •



## FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State

June 26, 2002

BEST UNIVERSAL CLEANING SERVICES, INC. C/O JEAN MARIE FREZIN 20411 NW 43RD CT MIAMI, FL 33055-1206

Subject: BEST UNIVERSAL CLEANING SERVICES, INC.

Reference Number: (

L77402

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

Provide the title(s) of each officer/director listed on the report or on an attachment.

TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 488-9000.

/mp ANNUAL REPORTS SECTION