

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 12, 2001 8:00 am
Secretary of State

0130238 AT

DOCUMENT # P00000008581

1. Entity Name
WILL 2 CLEAN, INC.



Principal Place of Business
 613 SEAGULL TERR.
 PORT ST. LUCIE FL 34952

Mailing Address
 613 SEAGULL TERR.
 PORT ST. LUCIE FL 34952

00075298



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
543 SE Sunnybrook Ter
 Suite, Apt. #, etc.

3. Mailing Address
543 SE Sunnybrook Ter
 Suite, Apt. #, etc.

City & State
Port St. Lucie, FL
 Zip
34983
 Country
Port St Lucie

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Port St Lucie, FL
 Zip
34983
 Country
Port St Lucie

4. FEI Number
105-0975000
 Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FARRELL, RICKEY L ESQ.
1595 SE PORT ST. LUCIE BLVD.
PORT ST. LUCIE FL 34952

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** 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.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$550.00
After September 12, 2001 Fee will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PICKENS, WILLIAM 2555 MARION CARDINGTON RD.,EAST MARION OH 43302 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PICKENS, TIFFANI 2555 MARION CARDINGTON RD.,EAST MARION OH 43302 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Pickens William Jr. 543 sunnybrook Ter Port St Lucie FL 34983 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Pickens Tiffini 543 sunnybrook Ter Port St. Lucie, FL 34983 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **WILLIAM PICKENS**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date **7-9-01** (561) 873-1585
Daytime Phone #

CR2E034 (5/01)

Attachment
Doc# 70000000

8581-C0073298

Division of Corporations Uniform Business Report Filings,

I, Tiffini Pickens; of Will 2 Clean inc. apologize for not sending payment for reinstatement before July 9th. I truly do not recall getting the first notice. I handle all the bills, fees, and payments outgoing. Nor was I aware of the fee per year at all. I made sure our licenses were renewed, but unfortunately did not know this fee existed. We are new to the world of business.

There is also the possibility that we never received the first notice, our office moved in January 2001. In the report you have the old address listed. (see attached letter). To my understanding the first notice may have gone out sometime in January, or beginning of February. I would hope that you would consider not enforcing the late charge. Will 2 Clean inc. holds an excellent credit standing within the year we have been open, and we would have definitely paid the renewal fee if we had been aware. Thank you for your consideration.

Sincerely,

Tiffini R. Pickens
Will 2 Clean inc.
543 se Sunnybrook ter.
Port St. Lucie, Fl. 34983
561-873-1585

