

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000008861

1. Entity Name
JANITORS USA INC.

f

FILED
Jul 19, 2000 8:00 am
Secretary of State

07-19-2000 90152 033 ***150.00

Principal Place of Business
2300 2ND STREET SOUTH
ST. PETERSBURG FL 33705

Mailing Address
2300 2ND STREET SOUTH
ST. PETERSBURG FL 33705



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
 Suite, Apt. #, etc.
 City & State
 Zip

3. Mailing Address
19321-C US HWY 19N
 Suite, Apt. #, etc.
STE 601
 City & State
CLEARWATER FL
 Zip
33764
 Country
USA

4. FEI Number **59-3488191**
 Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent
BABULA, KRZYSZTOF
2300 2ND STREET SOUTH
ST. PETERSBURG FL 33705

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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.

FILE NOW!!! FEE IS \$550.00
After SEPTEMBER 13, 2000 Min. 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	P	<input type="checkbox"/> Delete
NAME	BABULA, KRZYSZTOF	
STREET ADDRESS	2300 2ND STREET SOUTH	
CITY-ST-ZIP	ST. PETERSBURG FL 33705	
TITLE	VP	<input type="checkbox"/> Delete
NAME	BROOKS, AGNIESZKA	
STREET ADDRESS	2300 2ND STREET SOUTH	
CITY-ST-ZIP	ST. PETERSBURG FL 33705	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
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CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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: *AGNIESZKA BROOKS* **REQUIRED** *Jul 11, 2000* Date Daytime Phone #

CR2E034 (5/00)

Attachment
P98000008861
B0103441

July 11th, 2000

**Department of State
Division of Corporations
P.O.Box 6327
Tallahassee FL 32314**

RE: Janitors USA Inc.

To Whom It May Concern,

We did not received the initial mailing form from you.
We ask that you accept the check for the amount of \$150.00.

Thank you,

Janitors USA Inc.