

Controls Tech, Inc.

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 91868 003 ***150.00

**2003 FOR PROFIT CORPORATION
 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P01000058231

1. Entity Name
CLEANING GENIE'S, CLEANING SERVICES, INC.



Principal Place of Business
 1701 WALNUT AVE
 WINTER PARK, FL 32789

Mailing Address
 1701 WALNUT AVE
 WINTER PARK, FL 32789

2. Principal Place of Business
7635 Glenmoor Lane
 Suite, Apt. #, etc.

3. Mailing Address
P.O. Box 2569
 Suite, Apt. #, etc.


☐ CHECK HERE IF MAKING CHANGES

City & State
Winter Park, Florida
 Zip
32792
 Country
USA

City & State
GOLDENROD, FLORIDA
 Zip
32733
 Country
USA

4. FEI Number
59-3725124
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

MILLER, RHONDA
 1701 WALNUT AVE
 WINTER PARK, FL 32789

7. Name and Address of New Registered Agent

Name
MARILYN GERBER
 Street Address (P.O. Box Number is Not Acceptable)
7635 GLENMOOR LANE
 City
WINTER PARK FL Zip Code
32792

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 so certify, the qualifications of registered agent.

SIGNATURE *x Marilyn Gerber*

(NOTE: Registered Agent Signature Required After 1/1/2003)

DATE

4-15-2003



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

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MILLER, RHONDA 1701 WALNUT AVE WINTER PARK, FL 32789 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GERBER, MARILYN 7635 GLENMOOR LANE WINTER PARK, FL 32792 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

OFF-2003 (1-01-02)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(5)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental reporting 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 507, Florida Statutes; and that my name appears in Block 10 or Block 11-1 changed, or on an attachment with an address, with all other like information.

SIGNATURE: *Marilyn Gerber*

SIGNATURE AND TYPE OF POSITION OF SIGNING OFFICER OR DIRECTOR

4-15-2003 907 222 4243
 Date
 Filing Number