

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED

03 SEP 26 PM 2:22

0073091  
AV

DOCUMENT # P02000110426

1. Entity Name  
MARIO PARADA PRESSURE CLEANING SERVICE, INC.



Principal Place of Business  
202 S.W. 54 AVENUE  
PLANTATION FL 33317

Mailing Address  
202 S.W. 54 AVENUE  
PLANTATION FL 33317

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
09/26/03--01079--015 \*\*150.00



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

13-4216916

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PARADA, MARIO  
202 S.W. 54 AVENUE  
PLANTATION FL 33317

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

*Mario Parada*  
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9/1/03

FILE NOW!!! FEE IS \$850.00

After September 10, 2003 Fee will be \$750.00

Make Check Payable to Florida Department of State

9. 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 D  
NAME PARADA, MARIO C  
STREET ADDRESS 202 S.W. 54 AVENUE  
CITY-ST-ZIP PLANTATION FL 33317 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D  
NAME PARADA, ADRIANA P  
STREET ADDRESS 202 S.W. 54 AVENUE  
CITY-ST-ZIP PLANTATION FL 33317 ☐ 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  
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CITY-ST-ZIP ☐ Delete

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NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Adriana P. Parada*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/1/03

951 791-6389

CR2E034 (4/03)

Davie Accounting & Associates, Inc.  
3619 Davie Blvd  
Fort Lauderdale, FL 33312

September 23, 2003

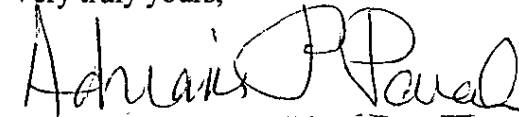
Division of Corporations  
Uniform Business Report Filings  
P.O. Box 1500  
Tallahassee, FL 32302-1500

To Whom It May Concern:

**RE: Mario Parada Pressure Cleaning Service, Inc.**  
**Document No.: P02000110426**

Please find enclosed a copy of my business report, which I received late, along with my check in the amount of \$150.00. I phoned a representative and told them that the report was not received via mail. I was then advised that I should mail the report with the enclosed check of \$150.00.

Very truly yours,

A handwritten signature in dark ink, appearing to read 'Adriana Parada', written over a horizontal line.

Adriana Parada  
Officer