

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P15000080502

**Entity Name:** U.S. SWEEPING OF PALM BEACH, INC.

**Current Principal Place of Business:**

7233 SOUTHERN BLVD., SUITE A3  
WEST PALM BEACH, FL 33413

**Current Mailing Address:**

2011 N.E. 210TH STREET  
MIAMI, FL 33179

**FEI Number:** 47-5268230

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

BAKAR, IRIS  
2011 N.E. 210TH STREET  
MIAMI, FL 33179 US

*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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

|                 |                              |                 |                           |
|-----------------|------------------------------|-----------------|---------------------------|
| Title           | PST                          | Title           | AUTHORIZED REPRESENTATIVE |
| Name            | BAKAR, IRIS                  | Name            | BAKAR, ISAAC              |
| Address         | 7233 SOUTHERN BLVD, SUITE A3 | Address         | 2011 N.E. 210TH STREET    |
| City-State-Zip: | WEST PALM BEACH FL 33413     | City-State-Zip: | MIAMI FL 33179            |

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** IRIS BAKAR

**PRESIDENT**

**03/16/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date