

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jul 13, 2001 8:00 am**  
**Secretary of State**

07-13-2001 90006 045 \*\*\*150.00

U122350 AI

**DOCUMENT # H91368**

1. Entity Name  
**SHARSTAN CORPORATION**

(LA)

Principal Place of Business

**506 CHARLOTTE ROAD**

~~P.O. BOX 887~~

**AUBURNDALE FL 33823-4506**

Mailing Address

**506 CHARLOTTE ROAD**

~~P.O. BOX 887~~

**AUBURNDALE FL 33823-4506**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-2619545**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
 Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**BYWATER, JOSEPH G.**  
**1828 S. FLORIDA AVE.**  
**LAKELAND FL 33806**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

7. Name and Address of New Registered Agent

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.  
 (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	PD JOHNSON, STANLEY J. 506 CHARLOTTE RD. AUBURNDALE FL	<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
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	<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
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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 I am empowered.

SIGNATURE: *[Signature]*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-10-01 863-967-5626  
 Date Daytime Phone #

CR2E034 (5/01)



*Attachment*  
Residential/Commercial  
Cleaning Services

ServiceMaster  
of Polk County  
506 Charlotte Road  
Auburndale, FL 33823  
863/967-5676  
Fax: 863/967-4479  
E-mail: jim.smpcjj@verizon.net

July 10, 2001

*# H91368*  
*C0013356*



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

Dear Sirs:

Per Mr. Stanley J. Johnson's (President of ServiceMaster of Polk County) phone conversation with your office today, we are sending our check #2981 for \$150.00. We are very sorry that this is late.

As you can tell by our records, we have never been late in filing these fees in the past. We did not receive the original first notice of this fee being due for 2001. Please notice that on our form, your office still shows our old P.O. Box as our mailing address. This has not been in use for about 3 years. Our local post office has not been forwarding the old P.O. box mail for over a year now. Please change your records to reflect our correct mailing address:

506 Charlotte Road  
Auburndale, FL 33823

Again, we are very sorry about this mix-up. Please accept this check for \$150.00 as payment in full for this fee..

If you have any questions, please call our office at the above number or on our toll-free number 1-888-289-4539.

Sincerely,

Norma J. Gumina  
Office Manager  
ServiceMaster of Polk County



An independent business  
licensed to serve you  
by ServiceMaster Clean