2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 17, 2002 8:00 am
Secretary of State
01-17-2002 90021 003 ***150.00

DOCUMENT # K08196

1. Entity Name
DAVE'S QUALITY SERVICES, INC.

Principal Place of Business	Mailing Address
1921 PICCADILLY CIRCLE CAPE CORAL FL 33991 US	1921 PICCADILLY CIRCLE CAPE CORAL FL 33991 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
1912 Piccadilly Cir Suite, Apt. #, etc.	1912 Piccadilly Circle Suite, Apt. #, etc.
City & State: Cape Coral, FL	City & State: Cape Coral FL
Zip: 33991 Country: USA	Zip: 33991 Country: USA

4. FEI Number 65-0017218 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
GYDOSH, DAVID 1823 PICCADILLY CIR CAPE CORAL FL 33991	Name: Gydosh, David Street Address (P.O. Box Number is Not Acceptable): 1912 Piccadilly Circle City: Cape Coral FL Zip Code: 33991

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 $150.00
After May 1, 2002 Fee will be $550.00
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			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GYDOSH, DAVID 1912 PICCADILLY CIRCLE CAPE CORAL FL 33991	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP GYDOSH, BONNIE 1912 PICCADILLY CIRCLE CAPE CORAL FL 33991	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T CLASSETTI, MICHAEL 2006 SW 7TH PL CAPE CORAL FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T Michael Ciassetti 2837 S.W. 26th Ave Cape Coral, FL 33904	☐ 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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CR2E034 (9/01)

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: Bonnie Gydosh VP 1/8/2001 (941) 283-5153
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #