2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR)

K50019

1. Entity Name

DOCUMENT #

RICHARD'S CLEANING SERVICE INC.

, selve	
---------	--

FILED Apr 23, 2003 8:00 am Secretary of State

04-23-2003 90085 006 ***150.00

						WE IN						
Principal Place of Business C/O RICHARD PIELAT		C/O I	Mailing Address C/O RICHARD PIELAT					:				
_2795_WESLEYAN_DRIVE PALM HARBOR FL 34684			PALM HARBOR FL 34684									
2. Principal Place of Business			3. Ma	3. Mailing Address								
Suite, Apt. #, etc.				Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES				
City & State			City	City & State			4.	4. FEI Number 59-2919286 Applied For Not Applied				
Zip	Country Zip Cour					try	5. Certificate of Status Desired \$8.75 Additional Fee Required					
6.	. Name and	Address of Currer	t Registere	ed Agent			7. 1	Name and Address of New Regis	tered Agen	t		
PIELAT, RICHA	חסו					Name		•			!	
				Street Address			s (P.O. B	(P.O. Box Number is Not Acceptable)				
2975 WESLEYAN DR PALM HARBOR FL 34684									*			
						City			FL	Zip Code	9	
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	ture, typed or print	ed name of registered agei	nt and title if app	olicable. (NOTE	: Registere	d Agent signature requ	ired when re	einstating)	DATÉ			
	-,84,9							T				
After May 1, 2003 Fee will be \$550.00					٠.			Election Campaign Financi Trust Fund Contribution.	ng 🗆		May Be to Fees	
10.		OFFICERS ANI		DQ.	11.			L DDITIONS/CHANGES TO OFFICER	S AND DID	ECTORS	EINI 11	
TITLE D		OFFICERS ANI	DIRECTO	Delete	TITLE	:	AL	DUTTONS/CHANGES TO OFFICER		Change	Addition	
NAME PIEL	LAT, RICHAI			<u></u>	NAMI					oag.		
	DALLA LALDRON C ALCAL					ET ADDRESS -ST-ZIP						
TITLE D	- FANDON	F 34004		☐ Delete	TITLE			····		Change	Addition	
1-	LAT, GRAZY	NA		∟ Delete	NAME				Ш,	Change	Addition	
STREET ADDRESS 2795	5 WESLEYA M HARBOR	n dr				ET ADDRESS ST-ZIP						
TITLE				☐ Delete	TITLE			· · · · · · · · · · · · · · · · · · ·		Change	Addition	
NAME					NAME							
STREET ADDRESS						ET ADDRESS		•			j	
CITY-ST-ZIP					-	ST-ZIP		<u> </u>		Channa	Addition	
TITLE NAME				☐ Delete	TITLE				Ц'	Change	Addition	
STREET ADDRESS						ET ADDRESS					(
CITY-ST-ZIP			1%		CITY-	ST-ZIP			_			
TITLE				☐ Delete	TITLE					Change	☐ Addition	
NAME STREET ADDRESS					NAME	ET ADDRESS					}	
CITY-ST-ZIP						ST-ZIP						
TITLE				☐ Delete	TITLE			<u> </u>		Change	Addition	
NAME					NAME				_ -	-	{	
STREET ADDRESS CITY-ST-ZIP						T ADDRESS		,				
	thatithe infor	mation supplied with	h this files	door not qualify for	<u> </u>	ST-ZIP	Continu	119 07(3)(i) Florida Statutes Lfurth		at the le	formation	

indicated on this report or supplied with this inling does not quality 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 of 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: