

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED

DOCUMENT # K72681

1. Entity Name

JAYNE'S CLEANING SERVICE, INC.



03 OCT 31 AM 10:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

565 BARRY AVENUE

3. Mailing Address

SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

LITTLE TORCH KEY, FL

City & State

4. FEI Number

65-0115495

Applied For

Not Applicable

Zip

33042

Country

USA

Zip

Country

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

JAYNE MARZELLA

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

565 BARRY AVENUE

City

LITTLE TORCH KEY FL

Zip Code

33042

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

Jayne Marzella

Signature, typed or printed name of registered agent and title, applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

10-28-03

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PRESIDENT
JAYNE MARZELLA
565 BARRY AVENUE
LITTLE TORCH KEY, FL 33042

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
500024343925
10/31/03--01108--021 **\$00.00

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

10-28-03 (305) 822-8866

Daytime Phone #

CR2E034B (12/02)

Marlene Cruz Morato, P.A.

Certified Public Accountant

October 27, 2003

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

Re: Jayne's Cleaning Service, Inc.
Document Number: K72681

To Whom It May Concern:

Attached please find a completed UBR and a check in the amount of \$300.00.

The taxpayer moved and did not receive the annual UBR; therefore, no form was filed.

Recently, upon taking this taxpayer on as a new client we noted this deficiency and brought it to the taxpayer's attention.

We respectfully ask that you reinstate the above referenced taxpayer.

Thank you in advance for your prompt attention to this matter.

Sincerely,

McMorato, CPA

Marlene Cruz Morato, CPA