

# 2000 UNIFORM BUSINESS REPORT (UBR) AMENDED

DOCUMENT # L08483

1. Entity Name

SHORES SQUARE CLEANERS, INC.

Principal Place of Business

9023 Biscayne Boulevard  
Miami Shores, FL 33138

Mailing Address

SAME

2. Principal Place of Business

9023 Biscayne Boulevard

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

Miami Shores, FL

City & State

Zip

33138

Country

USA

Zip

Country

4. FEI Number

65-0152146

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

Mabel Avendano

600 N.E. 36 Street, Apt. 6

Miami, FL 33137

7. Name and Address of New Registered Agent

Name

Christopher P. Kelley

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

11098 Biscayne Boulevard, Suite 205

City Miami

FL

Zip Code  
33161

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)

06/19/2000

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, 2000 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

TITLE PSD ☒ Delete  
NAME Mabel Avendano  
STREET ADDRESS 600 N.E. 36th Street, Apt. 6  
CITY-ST-ZIP Miami, FL 33137 US

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PSD ☒ Change ☒ Addition  
NAME Edwin Anderson  
STREET ADDRESS 9023 Biscayne Boulevard  
CITY-ST-ZIP Miami Shores, FL 33138

TITLE VTD ☐ Change ☒ Addition  
NAME Alan Alesi  
STREET ADDRESS 9023 Biscayne Boulevard  
CITY-ST-ZIP Miami Shores, FL 33138

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 507, 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Edwin Anderson, President

06/27/2000

(305) 758-3108

Date

Daytime Phone #

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATION

00 OCT -2 AM 10:58

DO NOT WRITE IN THIS SPACE

600003423586--5  
-10/12/00--01035--022

\*\*\*\*\*51.25 \*\*\*\*\*51.25

10/19