

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 05, 2002 8:00 am
Secretary of State

02-05-2002 90068 003 ***150.00

0050500 AV

DOCUMENT # L36415

1. Entity Name

AFFORDABLE HOME AND BUSINESS CARE, INC.

Principal Place of Business

20588 CHARING CROSS CIRCLE
 ESTERO FL 33928
 US

Mailing Address

20588 CHARING CROSS CIRCLE
 ESTERO FL 33928
 US



2. Principal Place of Business

25740 Hickory Blvd

Suite, Apt. #, etc.

BONITA SPRINGS-FL

City & State

#644D

Zip

34134

Country

3. Mailing Address

25740 Hickory Blvd

Suite, Apt. #, etc.

#644D

City & State

BONITA SPRINGS-FL

Zip

34134

Country

DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0172833

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

DALESSANDRO, JUDITH L
 20588 CHARING CROSS CIRCLE
 ESTERO FL 33928

7. Name and Address of New Registered Agent

Name

JAY J. D'ALESSANDRO

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

25740 Hickory Blvd #644D

City

BONITA SPRINGS

FL

Zip Code

34134

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

Jay J. D'Alessandro

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

TITLE ☐ Delete
 NAME D
 STREET ADDRESS D'ALESSANDRO, JAY J.
 CITY-ST-ZIP 20588 CHARING CROSS CIRCLE
 ESTERO FL

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 ☒ Change ☐ Addition
 NAME
 STREET ADDRESS 25740 Hickory Blvd #644D
 CITY-ST-ZIP BONITA SPRINGS-FL 34134

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

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

TITLE ☐ Change ☐ Addition
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 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)(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:

Jay J. D'Alessandro

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)