2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

L47133 **DOCUMENT #**

1. Entity Name

THE REGATTA CLEANING CO., INC.

FILED Apr 24, 2003 8:00 am Secretary of State

04-24-2003 90165 011 ***150.00

Principal Place of Business C/O. RAND. JUDITH. K. 750 E. SPANISH RIVER BLVD #302 BOCA RATON FL 33431-6101 US			Mailing Address C/O RAND, JUDITH, K. 750 E. SPANISH BLVD #302 BOCA RATON FL 33431-€101 US									
2. Principal Place of Business			3. Mailing Address							HI BIBIN BEBEL B	\$	
Suite, Apt. #, etc.			Suite, Apt. #, etc.					☐ CHECK HERE IF MAKING CHANGES				
City & State			City & State				4. FEI Number 65-0169278			Applied For Not Applicable		
Zip Country			Zip		ntry	5. Certificate of Status Desired			\$8.75 Additional Fee Required			
	6. Name a	nd Address of Current	Register	ed Agent			7.	Name and Address of New Re	sistered A	gent		
		•	-	Ŧ	-	Name -	-				İ	
RAND, JU			Street Address			ss (P.O. B	s (P.O. Box Number is Not Acceptable)					
		8 BLVD., #302									<u></u>	
BOCA RA	ATON FL 3343	1				ļ						
						City			FL	Zip Cod	е	
	e named entity s ations of register		or the purp	oose of changing its	s register	ed office or regi	stered ag	ent, or both, in the State of Flori	da. † am fa	ımiliar with,	and accept	
SIGNATURE	Signature, typed or	printed name of registered agent	and title if app	olicable. (NOT	TE: Registere	d Agent signature req	uired when re	einstating)	, DATE			
Afte	er May 1, 2003	FEE IS \$150.00 Fee will be \$550.00 lorida Department of	f State					Election Campaign Final Trust Fund Contribution.	ncing		May Be I to Fees	
10.		OFFICERS AND	DIRECTO	J DRS	11.		AD	L DDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTOR	S IN 11	
TITLE	PT	.		☐ Delete	TITL	E				Change	Addition	
NAME	RAND, JUDI	TH K			NAM	E						
STREET ADDRESS					STRE	STREET ADDRESS						
CITY-ST-ZIP	BOCA RATO)N FL			CITY	-ST-ZIP						
TITLE	VS /			☐ Delete	TITL					Change	☐ Addition	
NAME	TIPPETT, FR				NAM	- 1						
STREET ADDRESS	750 E. SPAI	NISH RIVER BLVD., #	¥302			ET ADDRESS						
CITY-ST-ZIP	BOCA RATO	IN PL			_	-ST-ZIP						
TITLE Name				☐ Delete	TITL					Change	☐ Addition	
STREET ADDRESS	1					ET ADDRESS						
CITY-ST-ZIP			•			-ST-ZIP						
TITLE			•	☐ Delete	TITLI	:				☐ Change	Addition	
NAME				Delete	NAM						, addition	
STREET ADDRESS					STRE	ET ADDRESS						
CITY-ST-ZIP					CITY	-ST-ZIP						
TITLE				☐ Delete	TITLE				************	☐ Change	☐ Addition	
NAME					NAM	E				·		
STREET ADDRESS					STRE	ET ADDRESS						
CITY-ST-ZIP					CITY	-ST-ZIP						
TITLE				☐ Delete	TITLE					☐ Change	☐ Addition	
NAME					NAM							
STREET ADDRESS						ET ADDRESS						
CITY-ST-ZIP	ł				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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: