## **2003 FOR PROFIT CORPORATION** UNIFORM BUSINESS REPORT (UBR)

Mailing Address

% GAILE MINER

5576 PARK RD

## L54654 **DOCUMENT #**

1. Entity Name

% GAILE MINER

5576 PARK RD

Principal Place of Business

ACADEMY CARPET CLEANERS, INC.



**FILED** Feb 05, 2003 8:00 am Secretary of State

02-05-2003 90118 029 \*\*\*150.00

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2. Principal Place of Business		3. Mai	3. Mailing Address								
Suite, Apt. #, etc.			Suite	Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES			
City & State			City	City & State			<b>4.</b> F	<sup>-El Number</sup> <b>65-0186151</b>		Applied For Not Applicable	
Zip		Country	Zip	Zip Count			5. (	Certificate of Status Desired	□ \$8.75 Fee Req	Additional uired	
	6. Name	and Address of Current	Registere	d Agent		, 1	7. N	lame and Address of New Regis	tered Agent		
					Name						
MINER, GA						Street Address (P.O. Box Number is Not Acceptable)					
5576 PARI	( RD						· '				
FT. MYERS	S FL 33908										
					City FL Zip Code						
	named entity ions of registe		or the purp	ose of changing its	register	ed office or i	registered ag	ent, or both, in the State of Florida	. I am familiar v	vith, and accept	
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE											
· ·				<u> </u>							
After	May 1, 200	FEE IS \$150.00 Fee will be \$550.00 Florida Department o	of State					<ol> <li>Election Campaign Finance Trust Fund Contribution.</li> </ol>		<b>5.00</b> May Be dded to Fees	
10.	7.7 .	OFFICERS AND	DIRECTO	PRS	11.		AD	DITIONS/CHANGES TO OFFICE	RS AND DIRECT	ORS IN 11	
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12 Lhoroby	portify that the	information supplied wit	h this filing	does not qualify for	the exe	motion state	ed in Section	119.07(3)(i). Florida Statutes, I fur	ther certify that :	the information	

Thereby certify that are information supplied with this himling does not quality for the exemption stated in declared in 1950(0). Florida Statutes, I further certify that this indicated on this report or suppliemental 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:

PAMPEQUIPFRANKIN H. MINER SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

239-267-5700