FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

03 MAY 13 PM 4:06

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000001042

1. Entity Name
ALL-BRIGHT CLEANING & MAINTENANCE SUPPLIES AND SERVICES, INC.

Principal Place of Business	Mailing Address
~~855 SE POLYNESIAN AVENUE~~	~~855 SE POLYNESIAN AVENUE~~
~~PORT ST. LUCIE, FL 34983~~	~~PORT ST. LUCIE, FL 34983~~

CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc. 2722 SW Pier Ct	Suite, Apt. #, etc. 2722 SW Pier Court
City & State Port ST Lucie FL	City & State Port ST Lucie FL
Zip 34953- Country usa	Zip 34953 Country USA

4. FEI Number 65-0971173 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
FERRI, EDWARD JOSEPH ~~855 SE POLYNESIAN AVENUE~~ ~~PORT ST. LUCIE, FL 34983~~	Name Street Address (P.O. Box Number is Not Acceptable) 2722 SW Pier Court City Port St Lucie FL Zip Code 34953

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 Rosann Ferri Vice President 5/7/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $160.00
After May 1, 2003 Fee will be $550.00
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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P FERRI, EDWARD J ~~855 SE POLYNESIAN AVE.~~ ~~PORT SAINT LUCIE, FL 34983~~	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition	2722 SW Pier Court Port St Lucie, FL 34953
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V FERRI, ROSANN ~~855 SE POLYNESIAN AVE.~~ ~~PORT SAINT LUCIE, FL 34983~~	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition	2722 SW Pier Court Port St Lucie, FL 34953
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CR2E034 (10/02)

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: Rosann Ferri Vice President 5/7/03 7728783122
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

5/20 aw