
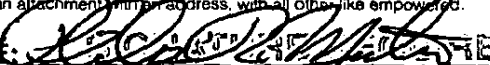


2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 09, 2003 8:00 am
Secretary of State

06-09-2003 90121 006 ***150.00

DOCUMENT # P00000007635								
1. Entity Name HYDRO-RINSE CARPET CLEANING SPECIALISTS, INC.								
Principal Place of Business 1500 SW 30TH AVENUE # 6 BOYNTON BEACH FL 33426		Mailing Address 1500 SW 30TH AVENUE # 6 BOYNTON BEACH FL 33426		<div style="font-size: 2em; font-weight: bold;">[REDACTED]</div>				
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.						
City & State		City & State						
Zip	Country	Zip	Country					
4. FEI Number 65-0028310				<input type="checkbox"/> CHECK HERE IF MAKING CHANGES <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td>Applied For</td> <td rowspan="2" style="text-align: center; vertical-align: middle;">\$8.75 Additional Fee Required</td> </tr> <tr> <td>Not Applicable</td> </tr> </table>		Applied For	\$8.75 Additional Fee Required	Not Applicable
Applied For	\$8.75 Additional Fee Required							
Not Applicable								
6. Name and Address of Current Registered Agent MARTIN, PHILIP R 1500 SW 30TH AVENUE # 6 BOYNTON BEACH FL 33426			7. Name and Address of New Registered Agent					
			Name					
			Street Address (P.O. Box Number is Not Acceptable)					
			City	FL	Zip Code			
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>								
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11					
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
NAME	MARTIN, PHILIP R		NAME					
STREET ADDRESS	1500 SW 30TH AVENUE # 6		STREET ADDRESS					
CITY- ST- ZIP	BOYNTON BEACH FL 33426		CITY- ST- ZIP					
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
NAME			NAME					
STREET ADDRESS			STREET ADDRESS					
CITY- ST- ZIP			CITY- ST- ZIP					
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
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TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
NAME			NAME					
STREET ADDRESS			STREET ADDRESS					
CITY- ST- ZIP			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: 			30 April 03 Date Daytime Phone #					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR								

CR2E034 (10/02)