

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 17, 2001 8:00 am
Secretary of State

09-17-2001 90151 049 ***158.75

DOCUMENT # P00000009997

1. Entity Name

TIME TO CLEAN U.S.A., INC.

Principal Place of Business

**4101 NW 119 AVE.
 SUNRISE FL 33323**

Mailing Address

**4101 NW 119 AVE.
 SUNRISE FL 33323**

2. Principal Place of Business

150 BONAVENTURE BLVD

3. Mailing Address

PO BOX 267694

Suite, Apt. #, etc.

10101

Suite, Apt. #, etc.

10101 FL

City & State

WESTON FL

City & State

WESTON FL

Zip

33326

Country

U.S.A

Zip

33326

Country

U.S.A

4. FEI Number

65-0974493

Applied For

Not Applicable

5. Certificate of Status Desired ☒

**\$8.75 Additional
 Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**RIVERA, EMMA L
 4101 NW 119 AVE.
 SUNRISE FL 33323**

7. Name and Address of New Registered Agent

Name

EMMA RIVERA.

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

150 BONAVENTURE BLVD APT #101

City

WESTON

FL

Zip Code

33326

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

Emma Rivera

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

09/10/01

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 \$550.00

**After September 12, 2001 Fee will be \$750.00
 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 **D** ☒ Delete
 NAME **RIVERA, EMMA L**
 STREET ADDRESS **4101 NW 119 AVE.**
 CITY-ST-ZIP **SUNRISE FL 33323**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
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 STREET ADDRESS
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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 **D** ☒ Change ☐ Addition
 NAME **RIVERA, EMMA L**
 STREET ADDRESS **PO BOX 267694**
 CITY-ST-ZIP **WESTON FL 33326.**

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

TITLE ☐ Change ☐ Addition
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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:

Emma Rivera

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

09/10/01 (454) 385-9830

Date

Daytime Phone #

CR2E034 (5/01)

A0086352

Attachment DOC# P00000009997

To Whom it may concern;

I was unaware of this Uniform Business Report. The only paper work I received was this form stating I need to pay \$ 550.00.

Understand that my address has changed, and I didn't receive the form for \$150.00 please disregard/wave the \$550.00 and accept the \$150.00 dollar check I am sending today. I hope you understand my failure to pay was

lack of knowledge as well as not receiving the paper work. With this

experience, I will make sure this never occurs again. I appreciate your time and consideration. Sorry for the misfortune and thank you for everything!

Time to Clean, USA

Emma Rivera



09/10/01