

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

FILED
May 27, 2002 8:00 am
Secretary of State

05-27-2002 90325 015 ***150.00

DOCUMENT # P000000043080 ✓

1. Entity Name *Captain Clean of Tallahassee Inc.*

Raymond Robinson Jr

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

910 Splendor RD # 4

Suite, Apt. #, etc.

4

3. Mailing Address

Tall FL 32301

Suite, Apt. #, etc.

City & State

Tall FL

City & State

4. FEI Number

59-3647136

Applied For

Not Applicable

Zip

32301

Country

Leon

Zip

32301

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Raymond Robinson Jr

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

910 Splendor RD # 4

City

Tallahassee

FL

Zip Code

32301

**DO NOT WRITE
IN THIS SPACE**

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

Raymond Robinson Jr

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so. ☒

(See criteria on back)

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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 *President*
NAME *Raymond Robinson Jr*
STREET ADDRESS *910 Splendor RD # 4*
CITY-ST-ZIP *Tallahassee FL 32301*

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IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Raymond Robinson Jr

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-1-02 850-566-4121

Date

Daytime Phone #

CR2E034B (12/01)