

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 12, 2001 8:00 am
Secretary of State

09-12-2001 90106 024 ***550.00

DOCUMENT # P00000097183

1. Entity Name

ADVANCED CLEANING SERVICES OF PALM BEACH COUNTY,

Principal Place of Business

**2037 E CAROL CIRCLE
 WEST PALM BEACH FL 33415**

Mailing Address

**2037 E CAROL CIRCLE
 WEST PALM BEACH FL 33415**

2. Principal Place of Business

2037 E CAROL CIRCLE

3. Mailing Address

P.O. BOX 5511

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

West Palm Bch

City & State

Lake Worth

4. FEI Number

65-1075353

Applied For

Not Applicable

Zip

33415

Country

FL

Zip

33466

Country

FL

5. Certificate of Status Desired

☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

TUCKER, JON

2037 E CAROL CIRCLE

WEST PALM BEACH FL 33415

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.

SIGNATURE

Jon Tucker

Jon Tucker President

8-29-01

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)

☒

**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 **TUCKER, JON**
 STREET ADDRESS **2037 E CAROL CIRCLE**
 CITY-ST-ZIP **WEST PALM BEACH FL 33415**

TITLE **D** ☐ Delete
 NAME **TUCKER, SYDIA**
 STREET ADDRESS **2037 E CAROL CIRCLE**
 CITY-ST-ZIP **WEST PALM BEACH FL 33415**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

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

TITLE ☐ Change ☐ Addition
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 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:

Jon Tucker

Jon Tucker 8-29-01

(561) 722-4488

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/01)