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2001 UNIFORM BUSINESS REPORT (UBR

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DOCUMENT # P0000097986						
1. Entity Name SPOTLESS CARPET CARE INC.				ار	e e e	;
				FILED		
Principal Place of Business Mailing Address 3270 NW 175TH ST 3270 NW 175TH ST					01 SEP 28 PM 1: 14	
		MIAMI FL 33056			SECRETARY OF STATE	
	•					
2. Principal Place of Business 3270 NW 1755+ 3270 NW 17			75 5+			
Suite, Apt. #, etc. Home Suite, Apt. #, etc. Home				{	DO NOT WRITE IN THIS SPACE	
City & State Mi Aru FC Migany FC				4	Fei Number 1046794 Applied For Not Applied	
2 Zip Country Zip			Country	Country 5. Certificate of Status Desired 7 \$8.75 Additional		
	6. Name and Address of Current R	egistered Agent	- Dance	7.	Pee Required . Name and Address of New Registered Agent	<u> </u>
CHRISTOPHER, AMOLAY A						
3270 NW 175TH ST				Address (P.O). Box Number is Not Acceptable)	
MIAMI'FL	33056					
			City		FL Zip Code	
8. The above	e named entity submits this statement for t	the purpose of changing its	registered office of	r registered	agent, or both, in the State of Florida.	
SIGNATURE AMINAY Christopher 08/4/01						
	Signature, typed/or printed name of registered agent an		Registered Agent signs		n reinstating) CATE	_
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) FILE NOW!!! F After September 12, 20 Make Check Payable to				e \$750.00	10. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees	.
11.	OFFICERS AND D		12.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	킅
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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	h all other like empowered.	<u> </u>		adulai	
SIGNATURE: HINDS AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Date Date Date Date Date Date Date						