

FILED
Jul 25, 2001 8:00 am
Secretary of State

TX1

07-25-2001 90009 039 ***150.00

2000 UNIFORM BUSINESS REPORT (UBR)

| | |
|--|---|
| DOCUMENT # P00000112763 | |
| 1. Entity Name A-TOTAL CLEANING CONCEPTS, INC. (LA) | |
| Principal Place of Business 8015 BEECHDALE DR ORLANDO, FL 32818 | Mailing Address 8015 BEECHDALE DR ORLANDO, FL 32818 |
| 2. Principal Place of Business 1801 E COLONIAL DR Suite, Apt. #, etc. 107 | |
| 3. Mailing Address 1801 E COLONIAL DR Suite, Apt. #, etc. 107 | |
| City & State ORLANDO, FL | City & State ORLANDO, FL |
| Zip 32803 | Country USA |
| 4. FEI Number | Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired | Fee Required \$8.75 Additional |
| 6. Name and Address of Current Registered Agent MAYWEATHER, KIETTA 8015 BEECHDALE DR ORLANDO, FL 32818 | |
| 7. Name and Address of New Registered Agent Name MAYWEATHER, KIETTA Street Address (P.O. Box Number is Not Acceptable) 1801E COLONIAL DR SUITE #107 City ORLANDO, FL Zip Code FL 32803 | |
| 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 <i>Kiota Mayweather Gamble</i> 7/10/2001 <small>Signature, typed or printed name of registered agent and title if applicable. Registered Agent signature required when reinstating.</small> | |
| 9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. <input type="checkbox"/> (See criteria on back) | |
| FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of State | |
| 10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees | |
| 11. OFFICERS AND DIRECTORS | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | DP MAYWEATHER, KIETTA 8015 BEECHDALE DR ORLANDO, FL 32818 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | DV GAMBLE, SAMMY III 8015 BEECHDALE DR ORLANDO, FL 32818 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | <input type="checkbox"/> Delete |
| 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | DP MAYWEATHER, KIETTA 1801 E COLONIAL DR #107 ORLANDO, FL 32803 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | DV GAMBLE, SAMMY III 1801 E COLONIAL DR #107 ORLANDO, FL 32803 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 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: <i>Kiota Mayweather Gamble</i> 7/10/01 (401) 822-7200 | |

80060508

DO NOT WRITE IN THIS SPACE

CR2034 (9/99)

Robinson Accounting of America

07/10/01

B0060508
Doc# P0000112763

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

To Whom It May Concern,

This letter is to inform that A-TOTAL CLEANING CONCEPTS, INC. , has relocated. The named Corporation did not receive a Annual Corporate Report. Due to these circumstances we are asking that you abate the reinstatement fees.

Your consideration concerning this matter is greatly appreciated.

Cordially yours,



Maurice Robinson
Robinson Accounting of America Inc.