

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 17, 2006 8:00 am
Secretary of State

01-17-2006 90261 006 ***158.75

DOCUMENT # P01000002998

1. Entity Name
ACD DRAIN CLEANING COMPANY, INC.



Principal Place of Business
**2038 POWDERHORN DR
CLEARWATER, FL 33755**

Mailing Address
**2038 POWDERHORN DR
CLEARWATER, FL 33755**

20001371

2. Principal Place of Business
SAME AS ABOVE
Suite, Apt. #, etc.

3. Mailing Address
P.O. BOX 16803
Suite, Apt. #, etc.



01032006 Chg-P CR2E034 (11/05)

City & State

City & State
CLEARWATER, FL.

4. FEI Number
65-1072494

Applied For
☐ Not Applicable

Zip Country

Zip Country
33766 PINELLAS

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

ORTIZ, NITZA E
2038 POWDERHORN DR
CLEARWATER, FL 33755

DELETE

7. Name and Address of New Registered Agent

Name
RAFAEL MARZAN
Street Address (P.O. Box Number is Not Acceptable)
2038 POWDERHORN DR.
City
CLEARWATER **FL** Zip Code
33755

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **Rafael Marzan, PRESIDENT (RAFAEL MARZAN)** **1/10/06**
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing ☐ **\$5.00** May Be
Trust Fund Contribution. Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P	<input checked="" type="checkbox"/> Delete
NAME ORTIZ, NITZA E	
STREET ADDRESS 2038 POWDERHORN DR	
CITY-ST-ZIP CLEARWATER, FL 33755	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME PRESIDENT	
STREET ADDRESS RAFAEL MARZAN	
CITY-ST-ZIP 2038 POWDERHORN DR.	
	CLEARWATER, FL. 33755
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Rafael Marzan, PRESIDENT (RAFAEL MARZAN)** **1/10/06** **727-447-6707**
Signature AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #