2002 UNIFORM BUSINESS REPORT (UBR)

FILED May 01, 2002 8:00 am Secretary of State DOCUMENT # P01000018850 1. Entity Name GIANT COMMERCIAL & INDUSTRIAL CLEANING SERVICES 05-01-2002 91540 001 ***150.00 INC. Principal Place of Business Mailing Address P.O. BOX 970233 P.O. BOX 970233 BOCA RATON FL 33497-0233 BOCA RATON FL 33497-0233 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 6*5-1*076*0*79 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CORPORATE CREATIONS NETWORK INC. Street Address (P.O. Box Number is Not Acceptable) 941 FOURTH STREET #200 MIAMI BEACH FL 33139 . . 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing Tax filing requirement and elects to do so. \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. (See criteria on back) Added to Fees Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE NAME CANTOR, JONATHAN NAME 6121 C. Durham Drive Lake Worth, FL 33467 STREET ADDRESS 22351 KETTLE CREEK WAY STREET ADDRESS CITY-ST-ZIP **BOCA RATON FL 33428** CITY-ST-7IP TITLE ☐ Delete `Change TITLE ☐ Addition NAME MARSHALL, LEONARD NAME 6121 C. Durham Drive STREET ADDRESS 22351 KETTLE CREEK WAY STREET ADDRESS CITY-ST-7IP **BOCA RATON FL 33428** CITY-ST-ZIP Lake Worth, FL 3346 ☐ Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE □ Delete TITLE ☐ Change Addition NAME

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 ith an address, with all other like empowered

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

Υ.

CR2E034 (9/01)