

FILED

Jul 16, 2002 8:00 am
Secretary of State

06-30-2002 90230 021 ***150.00

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P01000019778

1. Entity Name

Crystal Clear Window Cleaning, Inc. ✓

DO NOT WRITE IN THIS SPACE

38646

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3870 Lyons Road

Suite, Apt. #, etc.

#108

3. Mailing Address

P.O. Box 970370

Suite, Apt. #, etc.

City & State

Coconut Creek, FL

City & State

Coconut Creek, FL

4. FEI Number

58-2609628

Applied For

Not Applicable

Zip

33073

Country

USA

Zip

FL 33097

Country

USA

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

7. Name and Address of Current Registered Agent

Name

Cynthia Smith

Street Address (P.O. Box Number is Not Acceptable)

3870 Lyons Rd., #108

City

Coconut Creek

FL

Zip Code

33073

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

Cynthia Smith, President

Cynthia Smith

6/21/02

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) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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	P/S	TITLE	
NAME	Cynthia Smith	NAME	
STREET ADDRESS	3870 Lyons Rd. #108	STREET ADDRESS	
CITY-ST-ZIP	Coconut Creek, FL 33073	CITY-ST-ZIP	
TITLE	VP-1	TITLE	
NAME	Jeffrey A. Smith	NAME	
STREET ADDRESS	3870 Lyons Rd. #108	STREET ADDRESS	
CITY-ST-ZIP	Coconut Creek, FL 33073	CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
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STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

CR2E034B (12/01)

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Cynthia Smith, Cynthia Smith

6/21/02

954-701-4859

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #