FILED

## 2002 UNIFORM BUSINESS REPORT (UBR)

## Jan 27, 2002 8:00 am Secretary of State DOCUMENT # P01000035413 1. Entity Name 01-27-2002 90006 029 \*\*\*150.00 SUPERIOR CLEANING CARPET CO. Principal Place of Business Mailing Address 2217 SW 120 TER. 2217 SW 120 TER. GAINESVILLE FL 32607 GAINESVILLE FL 32607 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 Not Applicable Zip Country Zip Country \$8.75 Additional 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent VAM e hm AN LEHMAN, IVAN Street Address (P.O. Box Number is Not Acceptable) 7301 W. UNIVERSITY AVE. GAINESVILLE FL 32607 RERRACE 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 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE **Delete** TITLE Change Addition NAME LEHMAN, MERCEDES NAME STREET ADDRESS 2217 SW 120 TER. STREET ADDRESS · w 120 Tenae CITY-ST-ZIP GAINESVILLE FL 32607 CITY-ST-ZIP TITLE ☐ Delete TITLE NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE --- -☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE □ Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 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.