

# 2003 UNIFORM BUSINESS REPORT (UBR)

**DOCUMENT# P01000108024**

1. Entity Name

**CENTURA CLEANING SERVICES, INC.**

**FILED**  
**Apr 28, 2003 8:00 am**  
**Secretary of State**

04-28-2003 91366 015 \*\*\*150.00

**80096986**

Principal Place of Business

Mailing Address

**3806 NW 23RD COURT**  
**COCONUT CREEK, FL 33066**

**3806 NW 23RD COURT**  
**COCONUT CREEK, FL 33066**

2. Principal Place of Business

**7195 VACA KEY**

3. Mailing Address

**7195 VACA KEY**

Suite Apt. #, etc.

Suite Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

**LAKE WORTH, FL**

City & State

**LAKE WORTH, FL**

4. FEI Number

**65-1150284**

Applied For

Not Applicable

Zip

**33467**

Country

**USA**

Zip

**33467**

Country

**USA**

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**TAX HOUSE CORPORATION**

**3929 N. FEDERAL HWY**

**POMPANO BEACH FL 33064**

Name

**TAX HOUSE CORPORATION**

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

**533 E. SAMPLE ROAD**

City

**POMPANO BEACH**

**FL**

Zip Code

**33064**

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

**04/17/03**

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)

**FILE NOW! FEE IS \$150.00**

**After-MAY-1, 2003 Fee will be \$550.00**

**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

12. ADDITIONS /CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PTD	<input type="checkbox"/> Delete	TITLE	PTD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SILVA, SERIO RANIERY		NAME	SILVA, SERGIO RANIERY	
STREET ADDRESS	3806 NW 23RD COURT		STREET ADDRESS	7195 VACA KEY	
CITY-ST-ZIP	COCONUT CREEK, FL 33066		CITY-ST-ZIP	LAKE WORTH, FL 33467	
TITLE	PSD	<input checked="" type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DE SOUZA, MARCOS F		NAME		
STREET ADDRESS	3806 NW 23RD COURT		STREET ADDRESS		
CITY-ST-ZIP	COCONUT CREEK, FL 33066		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(1), 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 N changed or on an attachment with an address, with all other like empowered.

SIGNATURE:

**04/17/03**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #