

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 06, 2003 8:00 am**  
**Secretary of State**

02-06-2003 90109 044 \*\*\*150.00

DOCUMENT # P01000109706

1. Entity Name  
B & P CLEANING, INC.



Principal Place of Business  
116 AETNA ST., #A  
SEBASTIAN FL 32958

Mailing Address  
116 AETNA ST., #A  
SEBASTIAN FL 32958



2. Principal Place of Business  
765 CARNIVAL TEE  
Suite, Apt. #, etc.

3. Mailing Address  
765 CARNIVAL TEE  
Suite, Apt. #, etc.

☒ CHECK HERE IF MAKING CHANGES

City & State  
SEBASTIAN, FL  
Zip  
32958  
Country  
USA

City & State  
SEBASTIAN, FL  
Zip  
32958  
Country  
USA

4. FEI Number APPLIED FOR  
01-0587008  
Applied For  
Not Applicable

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

## 6. Name and Address of Current Registered Agent

RUSIGNUOLO, BRIDGET  
116 AETNA ST., #A  
SEBASTIAN FL 32958

## 7. Name and Address of New Registered Agent

Name  
Street Address (P.O. Box Number is Not Acceptable)  
City  
FL 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Bridget Rignuolo Bridget Rignuolo 2-04-03  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when relocating) DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2003 Fee will be \$550.00**  
**Make Check Payable to Florida Department of State**

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

## 10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
D	RUSIGNUOLO, BRIDGET	116 AETNA ST., #A	SEBASTIAN FL 32958	<input type="checkbox"/>
D	STEFANS, PETER	116 AETNA ST., #A	SEBASTIAN FL 32958	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Bridget Rignuolo Bridget Rignuolo 2-04-03  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2E034 (10/02)