

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 28, 2003 8:00 am
Secretary of State

05-19-2003 90201 011 ***150.00
08-28-2003 90072 014 ***150.00

DOCUMENT # P02000012089

1. Entity Name

PLANT CLEANERS CORP.



Principal Place of Business
**994 N BARFIELD DR. UNIT 11
MARCO ISLAND FL 34145**

Mailing Address
**994 N BARFIELD DR. UNIT 11
MARCO ISLAND FL 34145**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-1173556

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**ASLAND, MISTAFO
265 WATERSIDE CIRCLE, APT 101
MARCO ISLAND FL 34145**

7. Name and Address of New Registered Agent

Name **HITAY ASLAN**
Street Address (P.O. Box Number is Not Acceptable)
265 WATERSIDE Circle Apt 101
City **MARCO ISLAND** FL Zip Code **34145**

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 **HITAY ASLAN, Pres** *[Signature]* **8/28/2003**
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$550.00

After September 10, 2003 Fee will be \$750.00

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 **D** ☒ Delete
NAME **ASLAND, MISTAFO**
STREET ADDRESS **265 WATERSIDE CIRCLE, APT 101**
CITY-ST-ZIP **MARCO ISLAND FL 34145**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **HITAY ASLAN, Pres.** ☒ Change ☐ Addition
NAME
STREET ADDRESS **265 WATERSIDE Circle Apt 101**
CITY-ST-ZIP **MARCO ISLAND, FL 34145**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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NAME
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CITY-ST-ZIP

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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0108266 AV

CR2E034 (4/03)

ATTACHMENT # PO2000012089
80141967
15 AUGUST 2003

TO: FLORIDA DEPT OF STATE

RE: PLANT CLEANERS CORP

PO2000012089

CORPORATION DID NOT RECEIVE
PRIOR NOTICE

Gentleman,

PURSUANT TO YOUR request, I did
not receive the PRIOR NOTICE AND
respectfully Apologize for ANY
INCONVENIENCE THAT MAY HAVE BEEN
CAUSED.

THANK YOU AGAIN for your consideration

Respectfully

Wibby 