

FILED
Aug 14, 2003 8:00 am
Secretary of State

07-18-2003 90074 011 ***150.00

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

DOCUMENT # P02000079604			
1. Entity Name All-N-1 Cleaning Inc.			
DO NOT WRITE IN THIS SPACE			
2. Principal Place of Business 5085 Misty Lake Dr.		3. Mailing Address 5085 Misty Lake Dr.	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Mulberry, FL		City & State Mulberry, FL	
Zip 33860	Country U.S.A.	Zip 33860	Country U.S.A.
4. FEI Number 223858804		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
DO NOT WRITE IN THIS SPACE			
7. Name and Address of Current Registered Agent			
Name David Young			
Street Address (P.O. Box Number is Not Acceptable) 5085 Misty Lake Dr.			
City Mulberry FL Zip Code 33860			
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  DATE			
January 1 - May 1 Fee is \$150.00 After May 1 Fee is \$550.00 Amended UBR is \$61.25 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		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
President David Young 5085 misty lake Dr. Mulberry FL 33860		President David Young 5085 misty lake Dr. Mulberry FL 33860	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
Vice President Catherine Holbrook 5085 misty lake Dr. Mulberry FL 33860		Vice President Catherine Holbrook 5085 misty lake Dr. Mulberry FL 33860	
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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 507, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered.			
SIGNATURE:  DATE			

CR20345 (12/02)

