

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED

03 SEP 30 AM 9:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P02000098843

1. Entity Name

BRAMERICA PRESSURE CLEANING, CORP.



Principal Place of Business

9722 NW 14 STREET
CORAL SPRINGS FL 33071

Mailing Address

9722 NW 14 STREET
CORAL SPRINGS FL 33071

2. Principal Place of Business

9722 NW 14 Street

3. Mailing Address

9722 NW 14 Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State

Coral Springs, FL

City & State

Coral Springs, FL

4. FEI Number

72-1533872

Applied For

Not Applicable

Zip

33071

Country

USA

Zip

33071

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CHAVES, NORMA N
9722 NW 14 STREET
CORAL SPRINGS FL 33071

7. Name and Address of New Registered Agent

Name

OSWALDO CHAVES

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

9722 NW 14 Street

City

Coral Springs

FL

Zip Code

33071

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

09/25/2003

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
NAME
STREET ADDRESS
CITY-ST-ZIP
P.D
CHAVES, NORMA N
9722 NW 14 STREET
CORAL SPRINGS FL 33071 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V.D
CHAVES, OSWALDO
9722 NW 14 STREET
CORAL SPRINGS FL 33071 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S.D
CARDOSO, RINALDO
9722 NW 14 STREET
CORAL SPRINGS FL 33071 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition
300023415779
09/30/03--01005--014 **150.00

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

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

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

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

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

09/25/2003 (954) 340 2666

CR2E034 (4/03)

9722 NW 14 Street
Coral Springs, FL 33071

RE: BRAMERICA PRESSURE CLEANING, CORP
P02000098843

DEAR STATE DEPARTMENT,

PLEASE WAIVE MY LATE FEE BECAUSE I DID NOT RECEIVE THE 2003 ANNUAL REPORT PAPER IN MY HOUSE AT THE RIGHT TIME, I ONLY RECEIVED IT 3 DAYS AGO. THIS CORPORATION IS NEW AND I HAD NO IDEA THAT I HAD TO PAY THIS. I PROMISE YOU THAT NEXT YEAR, I WILL BE ONE OF THE FIRST PEOPLE TO FILE THE ANNUAL REPORT.

PLEASE CHECK IN RECORDS TO SEE IF YOU HAVE THE RIGHT ADDRESS:
9722 NW 14 STREET
CORAL SPRINGS, FL 33071

SINCERELY,


OSWALDO CHAVES