FILED

CR2E034 (4/03)

## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORTATION

## Aug 25, 2003 8:00 am Secretary of State DOCUMENT # P02000112662 08-25-2003 90104 044 \*\*\*150.00 1. Entity Name CITY CARPET CLEANERS, INC. Principal Place of Business Mailing Address 9401 NW 33 MANOR 9401 NW 33 MANOR SUNRISE FL 33351 SUNRISE FL 33351 2. Principal Place of Business 3. Mailing Address SAME Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES 9401 NW MANDA City & State City & State 4. FFI Number Applied For SUNRISE ORIDA Not Applicable Zip Zip Country \$8.75 Additional 5. Certificate of Status Desired ጂ Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name **ELLINGTON, DUDLEY** Street Address (P.O. Box Number is Not Acceptable) 9401 NW 33 MANOR SUNRISE FL 33351 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 lamiliar 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 FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing \$5.00 May Be After September 10, 2003 Fee will be \$750.00 $\Box$ Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE PD ☐ Delete TITLE Change ☐ Addition **ELLINGTON. DUDLEY** NAME NAME STREET ADDRESS 9401 NW 33 MANOR STREET ADDRESS CITY-ST-ZIP SUNRISE FL 33351 CITY-ST-ZIP TITLE STD ☐ Delete TITLE ☐ Change ☐ Addition **ELLINGTON, PAULA** NAME NAME STREET ADDRESS 9401 NW 33 MANOR STREET ADDRESS CITY-ST-7IP SUNRISE FL 33351 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE. ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS

12. Thereby 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.

CITY-ST-ZIP

CITY-ST-ZIP

IRENDUCEY EllINGTON 8-20-03

## City Carpet Cleaners, Inc.

Commercial and Residential Cleaning

DEAR SIR/MADAM,

THIS IS to INFORM YOU THAT, THIS IS THE FIRST NOTICE I RECEIVED, I AM ASKING IF THE LATE FEE CAN BE WAINED.

SINCERLY

Duelley Ellington PRESEDENT.

DUDLEY Ellington