

**200. FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P02000132239

1. Entity Name
COOTE JANITORIAL SERVICES, INC.



FILED

11 APR 28 PM 4:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

2699 NW 68 TERRACE
FORT LAUDERDALE, FL 33313

DO NOT WRITE IN THIS SPACE

04282008 No Chg-P CR2E034 (11/05)

4. FEI Number
65-1184727

Applied For
Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

Gloria White - Coote
2699 N.W. 68 Terrace
Sunrise, FL 33313

**DO NOT WRITE
IN THIS SPACE**

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 Gloria White - Coote

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

(NOTE: Registered Agent signature required when reinstating)

4-24-11

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2011 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May be
Added to Fees

200205450992

4/28/11--01045--010 **158.75

10. OFFICERS AND DIRECTORS

TITLE D
NAME COOTE, NOEL
STREET ADDRESS 2699 N.W. 68 Terrace
CITY-ST-ZIP SUNRISE, FL 33313

TITLE D
NAME WHITE, GLORIA
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:

Gloria White - Coote

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-24-11 954-5301946

Date

Daytime Phone