

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2005 8:00 am
Secretary of State

05-05-2005 90108 025 ***150.00

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1. Entity Name

NORTHDALE CLEANER INC



50049326

2. Principal Place of Business

3883 Northdale Blvd

3. Mailing Address

3883 Northdale Blvd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

TAMPA, FL

City & State

TAMPA, FL

4. FEI Number

32-0133530

Applied For

Not Applicable

Zip

33624

Country

Zip

33624

Country

5. Certificate of Status Desired

☐

\$8.75

Additional Fee Required

7. Name and Address of Current Registered Agent

Name

YASMIN ESMAIL

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

16378 Northdale Oaks

City

TAMPA

FL

Zip Code

33624

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 fee if applicable

(NOTE: Registered Agent signature required when attending)

Date

9. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

10.

OFFICERS AND DIRECTORS

TITLE	P, V, S, T, D
NAME	YASMIN ESMAIL
STREET ADDRESS	16378 Northdale Oaks
CITY - ST - ZIP	TAMPA, FL 33624
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 118.07(3)(f), 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 I 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Y Esmail

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-30-05

Date

813-963-0699

Telephone Number