

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT #** P92000011993

1. Entity Name

BETTER JANITORIAL SERVICES, INC.**FILED**
Apr 20, 2001 8:00 am
Secretary of State

04-20-2001 90028 017 ***150.00

C0049834

Principal Place of Business Mailing Address
10201 SW 37th STREET 10201 SW 27th STREET
MIAMI, FL 33165 MIAMI, FL 33165

2. Principal Place of Business 3. Mailing Address
Suite, Apt. #, etc. 10201 SW 37th STREET
City & State Suite, Apt. #, etc.

City & State City & State
MIAMI, FL 33165

Zip Country Zip Country

4. FEI Number Applied For
65-0377378 Not Applicable

5. Certificate of Status Desired \$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

HERNANDEZ, JESUS
10201 SW 37th STREET
MIAMI, FL 33165

7. Name and Address of New Registered Agent

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

SIGNATURE (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing \$5.00 May Be
Trust Fund Contribution. Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
PT	HERNANDEZ, JESUS	10201 SW 37th STREET	MIAMI FL 33165	<input type="checkbox"/>
SV	HERNANDEZ, MERCEDES	10201 SW 37th STREET	MIAMI FL 33165	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *x Jesus Hernandez* **JESUS HERNANDEZ PRES.**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)