

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 26, 2002 8:00 am**  
**Secretary of State**

03-26-2002 90034 038 \*\*\*150.00

**DOCUMENT # P92000011993**

1. Entity Name

**BETTER JANITORIAL SERVICES, INC.**

Principal Place of Business

**10201 SW 37TH STREET  
 MIAMI FL 33165  
 US**

Mailing Address

**10201 SW 37TH STREET  
 MIAMI FL 33165  
 US**

2. Principal Place of Business

**10421 SW 53rd STREET**

3. Mailing Address

**10421 SW 53rd STREET**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

**MIAMI FL**

City & State

**MIAMI FL**

Zip

**33165**

Country

Zip

**33165**

Country

4. FEI Number

**65-0377378**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**HERNANDEZ, JESUS  
 10201 SW 37TH ST  
 MIAMI FL 33165**

7. Name and Address of New Registered Agent

Name

**HERNANDEZ, JESUS**

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

**10421 SW 53rd STREET**

City

**MIAMI**

**FL**

Zip Code  
**33165**

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 **X**

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

(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, 2002 Fee will be \$550.00  
 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

**\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>HERNANDEZ, JESUS</b>	
STREET ADDRESS	<b>10421 SW 53rd STREET</b>	
CITY-ST-ZIP	<b>MIAMI, FL. 33165</b>	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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 SIGNATURE REQUIRED JESUS HERNANDEZ PRES.**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)