2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P93000026833 Aug 22, 2000 8:00 am Secretary of State 1. Entity Name CELEBRITY CARPET CARE, INC. 08-22-2000 90001 033 ***158.75 Principal Place of Business Mailing Address 406 ANNA AVE. 406 ANNA AVE. CLEARWATER FL 34625 CLEARWATER FL 33765 3. Mailing Address 2. Principal Place of Business 406 Anna Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Clemuste City & State 4. FEI Number Applied For City & State 59-3175906 Not Applicable Cleanings Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required USA 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent HALLER JOHN S ---(P.O. Box Number is Not Acceptable) 406 ANNA AVE. CLEARWATER FL 34625 33765 City 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 uited when reinstating) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After SEPTEMBER 13, 2000 Min. will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. ☐ Delete TITLE TITI F HALLER, JOHN S NAME NAME 406 ANNA AVE. STREET ADDRESS STREET ADDRESS **CLEARWATER FL** CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Oelete SMITH, FREDERICK W NAME 1611 STONE CREEK DR STREET ADDRESS STREET ADDRESS TARPON SPRINGS FL CITY-ST-ZIP CITY-ST-ZIP TITLE Change Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP-☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. I hereby certify that the information supplied with this filling 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.

TITLE

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

SIGNATURE:

TITLE NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

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CITY-ST-ZIP

SIGNAM REPORT TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Delete

☐ Delete

president

8-18.00

727 725 4657

Change

☐ Change

☐ Addition

☐ Addition

Daytime Phone #

pg3 0000 26833 Affachment OUSULG 9

DIVISION OF CORPORATIONS UNIFORM BUSINESS REPORT FILINGS PO BOX 1500 TALLAHASSEE, FL 32302-1500

RE: FILING LOST IN MAIL

TO WHOM IT MAY CONCERN,

ON 4-15-00 I FILLED OUT THE 2000 UNIFORM BUSINESS REPORT AND MAILED IT ALONG WITH A CHECK FOR \$150.00, APPARENTLY IT WAS LOST IN THE MAIL. RECENTLY I RECEIVED A 2ND NOTICE AND CALLED THE DEPT. CONCERNING THIS. I SPOKE WITH KRISTI W. ON 8-18-00, SHE ADVISED ME TO SEND THIS LETTER ALONG WITH ANOTHER CHECK FOR \$150.00, WHICH IS ENCLOSED. I HAVE ADDED \$8.75 TO RECEIVE A CERTIFICATE OF STATUS. PLEASE NOTE: MY ZIP CODE HAS CHANGED TO 33765

SHOULD YOU AT SOME FUTURE TIME RECEIVE THE ORIGINAL MAILING, PLEASE A RETURN IT TO ME.

JOHN S. HALLER

CELEBRITY CARPET CARE, INC.

406 ANNA AVE

CLEARWATER, FL 33765

727-725-4657