

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 28, 2003 8:00 am
Secretary of State

04-28-2003 91291 050 ***150.00

DOCUMENT # **P94000019575**

1. Entity Name

DAVID'S CARPET CLEANING, Inc.



DO NOT WRITE IN THIS SPACE

11023601

2. Principal Place of Business

7950 Hwy 78 W.

3. Mailing Address

7950 Hwy 78 W.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

OKEECHOBEE FL

City & State

OKEECHOBEE FL

4. FEI Number

650478756

Applied For

Not Applicable

Zip

Country

34974

Zip

Country

34974

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

DAVID ALLENICK

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

7950 Hwy 78 W.

City

OKEECHOBEE

FL

Zip Code

34974

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

X o d Allenick

DAVID ALLENICK

✓ 4-25-03

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

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **PD** NAME **DAVID ALLENICK**
STREET ADDRESS **7950 Hwy 78 W.**
CITY-ST-ZIP **OKEECHOBEE FL 34974**

TITLE **VPD** NAME **JUTTA ALLENICK**
STREET ADDRESS **7950 Hwy 78 W.**
CITY-ST-ZIP **OKEECHOBEE FL 34974**

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IN THIS SPACE**

12. 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: **X o d Allenick**

DAVID ALLENICK

✓ 4-25-03

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/02)