

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

FILED
May 08, 2002 8:00 am
Secretary of State

05-08-2002 90094 008 ***150.00

DOCUMENT # **P 940000 42 940**

1. Entity Name

C + C PROFESSIONAL CLEANING SERVICE INC

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

13 215 ORANGE AVE

Suite, Apt. #, etc.

3. Mailing Address

13 215 ORANGE AVE

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

GRAND ISLAND FL

City & State

GRAND ISLAND FL

Zip

Country

32735-9226

LAKE

Zip

Country

32735

LAKE

4. FEI Number

593254271

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

ROGERS, COMAN

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

13 215 ORANGE AVE

GRAND ISLAND

FL

Zip Code
32735

**DO NOT WRITE
IN THIS SPACE**

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 **ROGER S. COMAN PRESIDENT**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

Roger S. Coman 4-28-2002

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

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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 NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT ROGER S. COMAN 13 215 ORANGE AVE GRAND ISLAND FL 32735
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE PRESIDENT JUDY CHAVEZ 13 215 ORANGE AVE GRAND ISLAND FL 32735
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ROGER S. COMAN TREASURER ROGER S. COMAN 13 215 ORANGE AVE GRAND ISLAND FL 32735
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECRETARY JUDY CHAVEZ 13 215 ORANGE AVE GRAND ISLAND FL 32735
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**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Roger S. Coman

ROGER S. COMAN

4-28-2002

357-4784

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)

ATTACH # P94000042940/652093

2001/2002 APPLICATION & LICENSE
LAKE COUNTY OCCUPATIONAL LICENSE
STATE OF FLORIDA

BOB MCKEE
LAKE COUNTY TAX COLLECTOR

FACILITIES
OR
MACHINES

SEATS
EMPLOYEES

TYPE OF
BUSINESS
707 CLEANING SERVICE
COMMERCIAL CLEANING SERVICE

BUSINESS
ADDRESS
13215 ORANGE AV. CN
LAKE COUNTY, FL 32735

MAKE CHECKS PAYABLE TO
Bob McKee, Tax Collector
P.O. Box 327
Tallahassee, FL 32378-0327

NAME
MAILING
ADDRESS
C & C PROFESSIONAL CLEANING
SERVICE, INC.
COMAN ROGER S
13215 ORANGE AVE
GRAND ISLAND, FL 32735

ACCOUNT
707-0000711
EXPIRES
SEPT. 30, 2002

SUPPLEMENTAL
RENEWAL
NEW LICENSE
TRANSFER
ORIGINAL TAX

30.00

AMOUNT
PENALTY
COLLECTION COST
TOTAL

30.00

Roger S. Conner
SIGN AND DISPLAY AS REQUIRED

I SWEAR THAT THIS APPLICATION FOR LICENSE IS MADE FOR THE BUSINESS
OR PROFESSION INDICATED HEREON AND IS TRUE AND CORRECT.
THE APPLICATION MUST COMPLY WITH STATE AND LOCAL ORDINANCE,
INCLUDING ZONING.

OFFICIAL COPY ISSUED BY BOB MCKEE
TAX COLLECTOR, LAKE COUNTY

PAID 09/07/01 8000683.0001 30.00