(9/01)

FILED

2002 Uniform Business Report (UBR)

SIGNATURE

Apr 02, 2002 8:00 am Secretary of State **DOCUMENT #** P95000080329 1. Entity Name 04-02-2002 90887 039 ***150 00 JORDAN'S CLEAN MACHINE. INC. Principal Place of Business Mailing Address 13531 WALSINGHAM ROAD 13531 WALSINGHAM ROAD LARGO FL 34644 **LARGO FL 34644** 2. Principal Place of Business 3. Mailing Address 1.0 Bax 38 2465- Henrietta ave DO NOT WRITE IN THIS SPACE Çity & State City & State 4. FEI Number Applied For 59-3338753 ndian Locks Beach, FL Largo Not Applicable Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MCFADDEN, MICHAEL K ESQ. Street Address (P.O. Box Number is Not Acceptable) 200 CLEARWATER-LARGO RD. **LARGO FL 33770** Zip Code FL 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 Signature, typed or printed name of registered agent and title if applicable. DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its intangible 10. Election Campaign Financing \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 Addition **PST** ☐ Change TITLE ☐ Delete TITLE JORDAN, SYLVIA A NAME NAME CR2E034 STREET ADDRESS 13531 WALSINGHAM ROAD STREET ADDRESS **LARGO FL 33774** CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change ☐ Addition ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE Delete TITLE ☐ Change STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 accordete 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 of 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 a address, with all street the corporation of the receiver or trustee empowered.