

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jan 24, 2001 8:00 am**  
**Secretary of State**

01-24-2001 90025 015 \*\*\*150.00

**DOCUMENT # P96000010409**

1. Entity Name

**SOUTH FLORIDA SPECIAL CLEANING SERVICES, INC.**

Principal Place of Business

1045 SE 7TH COURT  
BLDG 6 STE 103  
DANIA FL 33004

Mailing Address

PO BOX 22-1905  
HOLLYWOOD FL 33022

2. Principal Place of Business

1045 SE 7th Court

3. Mailing Address

P.O. Box 22-1905

Suite, Apt. #, etc.

Bldg 6, Ste 103

Suite, Apt. #, etc.

City & State

Dania, FL 33004

City & State

Hollywood, FL 33022

Zip 33004

Country: USA

Zip 33022

Country: USA

4. FEI Number

65-0639492

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**PERROTA, RALPH**  
1045 SE 7TH COURT BLDG 6 STE 103  
DANIA FL 33004

7. Name and Address of New Registered Agent

Name

Perrotta, Ralph

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

1045 SE 7th Ct. Bldg 6, Ste 103

City Dania

FL

Zip Code

33004

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 Ralph Perrotta, President and Resident Agent

01/11/01

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, 2001 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 ☐ Delete  
NAME PT  
STREET ADDRESS PERROTA, RALPH  
CITY-ST-ZIP 1140 SW 111 AVE  
PEMBROKE PINES FL 33025

TITLE ☐ Delete  
NAME VPS  
STREET ADDRESS SINKU, ELIZABETH  
CITY-ST-ZIP 1140 SW 111 AVE  
PEMBROKE PINES FL 33025

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition  
NAME PT  
STREET ADDRESS PERROTTA, RALPH  
CITY-ST-ZIP 1045 SE 7th Ct., Bldg 6, Ste 103  
Dania, FL 33004

TITLE ☒ Change ☐ Addition  
NAME VPS  
STREET ADDRESS SINKU, Elizabeth  
CITY-ST-ZIP 2941 SW 87 Ave #405  
Davie, FL 33328

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ 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: Ralph Perrotta, President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/11/01 (954) 921-9698

Date

Daytime Phone #

CR2E034 (10/00)

0489899