2003 FOR PROFIT CORPORATION

FILED May 05, 2003 8:00 am **UNIFORM BUSINESS REPORT (UBR** Secretary of State P96000010409 DOCUMENT # 05-05-2003 92207 040 ***150.00 1. Entity Name SOUTH FLORIDA SPECIAL CLEANING SERVICES, INC. Principal Place of Business Mailing Address 1045 SE 7TH COURT PO BOX 22-1905 BLDG 6 STE 103 HOLLYWOOD FL 33022 DANIA FL 33004 2. Principal Place of Business 3. Mailing Address 3eD Are Hulo 1350 55 Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State Applied For 65-0639492 $A \sim A G$ Not Applicable Zip Zip Country \$8.75 Additional 5. Certificate of Status Desired 3300 Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent PERROTTA BUCOH PERROTA, RALPH Street Address (P.O. Box Number is Not Acceptable) 1045 SE 7TH COURT BLDG 6 STE 103 **DANIA FL 33004** Zip Code 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 FILE NOW!!! FEE IS \$150.00 \$5.00 May Be 9. Election Campaign Financing After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE TITLE □ Delete PERROTA, RALPH NAME NAME 1045 SE 7TH CT BLDG 6 STE 103 STREET ADDRESS STREET ADDRESS DANIA FL 33004 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition **VPS** TITLE Delete TITLE RAUPH SINKU, ELIZABETH PERCOTTAL NAME NAME 300 Are 2941 SW 87 AVE #405 STREET ADDRESS 1350 SE STREET ADDRESS EC 33004 DAVIE FL 33328 CITY-ST-ZIP DANGA CUTY-ST-7IP Addition ☐ Delete TITLE ☐ Change TITLE NAME NAME 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

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-7IP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

☐ Delete

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

☐ Change

Addition

CR2E034 (10/02)