

FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

1999

## DOCUMENT # P96000027180

C & B CARPET AND UPHOLSTERY CLEANING, INC.

Principal Place of Busines
711 BUCKMEISTER CIR
ORLANDO FL 32819
119

Mailing Address

711 BUCKMEISTER CT

## **FILED** Feb 22, 1999 8:00 am Secretary of State

02-22-1999 90094 003 \*\*\*150.00



URLANDO FL 30	2819	US US		DO NOT WRITE IN THIS SPACE						
					3. Date Incorporated or Qualifed 03/22/1996					
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number	•		Applied For		
21 1/1 /	BUCKMINSTER CIR.	26 P.O. BOX 6	1686	7	<b>59-3373370</b>			Not Applicable		
Suite, Apt. 1	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired	]		5 Additional Required		
City & State		City & State			6. Election Campaign Financing	-	\$5.	00 May Be		
23 ORIAN	<i></i> /	28 Delanoo	Country		Trust Fund Contribution	_		led to Fees		
Zip	Country	Zip			8. This corporation owes the current	year Intar	ngjible	A.		
24 32803	3 25 DRANGE	29 32861-6867 30	ORA	NYE	Personal Property Tax.	ָּ ֭֓֞֞֞֞֜֓֓֓֓֓	▼ Yes	No		
	9. Name and Address of Current				10. Name and Address of New Reg	istered A	gent			
			81	Name						
BLAIR, CHARLES E					82 Street Address (P.O. Box Number is Not Acceptable)					
711 BUCKMEISTER CIR				OZ OROCI Address (1 . o. 200 Marines) to Not Address (1 . o. 200 Marines)						
,ORLA	ANDO FL 32819		83							
•			84	City			85	Zip Code		
			04	City		FL	[ [	Lip Code		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am fartilial with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Stepature brief of printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE										
	Signature, typed or printed name of registered agent		gistered Ager	t signature i	ADDITIONS/CHANGES TO OFFIC		DIRE	CTORS IN 12		
12.	PD OFFICERS AND	DELETE	1.1 TITLE		VICE PRES.		Cha			
TITLE	BLAIR, CHARLES E	□ occure	4014145		TUVE L. BLAIR			,		
NAME	711 BUCKMEISTER CIR		1.2 NAME	4000000	111 BUCKMINSTER CIR			(		
STREET ADDRESS	ORLANDO FL				DELANDO FL 30803					
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NAME			2.2 NAME	40000000						
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NAME			4.2 NAME	ADODESS						
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TITLE		_ 5	5.2 NAME				_	- <u>-</u>		
NAME			5.3 STREE	ADDRESS				[		
STREET ADDRESS			5.4 CITY-S					Ì		
CITY-ST-ZIP		DELETE	61 TITLE				Cha	nge Addition		
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NAME				ADDRESS				}		
STREET ADDRESS			0.3 STREE							

14. 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 annual report or supplemental annual 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 received trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changes, or or attack point with an address, with all other like empowered.

SIGNATURE: