2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P96000072725**

1. Entity Name

_ Zip_

STUART, RUTH M

8662 GLYBORNE CT ORLANDO FL 32825

A.A.G. CLEANING & MAINTENANCE, INC.

Country

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

9. This corporation is eligible to satisfy its Intangible

EITTREIM, DEBRA J

STUART, RUTH M

ORLANDO FL-

8662 GLYBORNE CT

ORLANDO FL VPST

10298 WATER HYACINTH

Tax filing requirement and elects to do so.

(See criteria on back)

11.

TITLE

NAME

TITLE

NAME

TITLE NAME

TITLE

NAME

TITLE

NAME

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-7IP

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-7IP

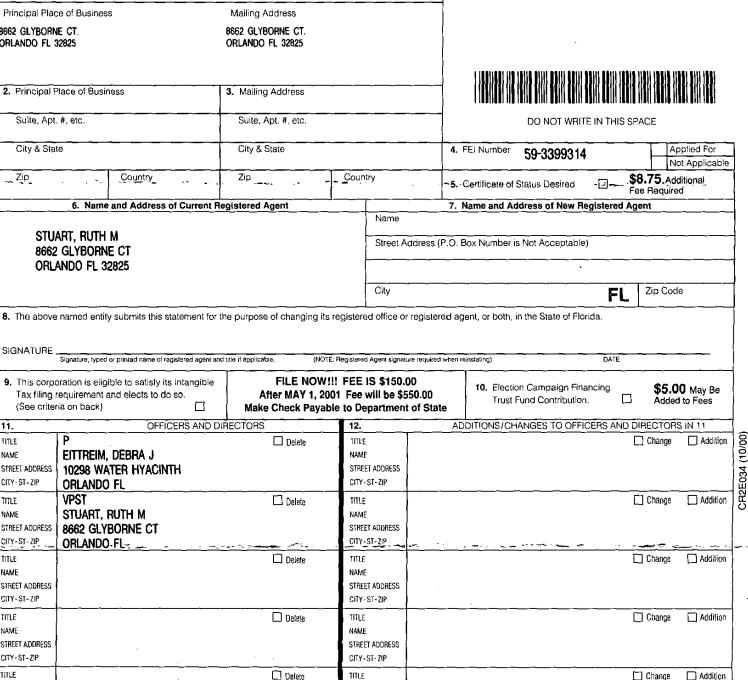
6. Name and Address of Current Registered Agent

OFFICERS AND DIRECTORS

Principal Place of Business	Mailing Address	
8662 GLYBORNE CT. ORLANDO FL 32825	8662 GLYBORNE CT. ORLANDO FL 32825	
2. Principal Place of Business	3. Mailing Address	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	
City & State	City & State	

Apr 16, 2001 8:00 am Secretary of State

04-16-2001 90001 003 ***150.00



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.

Country

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2001 Fee will be \$550.00

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12.

TITLE

NAME STREET ADDRESS

TITLE

NAME

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NAME

TITLE

NAME STREET ADDRESS

TITLE

NAME

TITLE

NAME

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-7IP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

City

SIGNATURE:

☐ Change

Addition