

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000015656

1. Entity Name

DOCTOR CLEAN COMMERCIAL CLEANING, INC.

FILED
May 23, 2001 8:00 am
Secretary of State

05-23-2001 91170 012 ***150.00

Principal Place of Business
318 BREAKWATER TERRACE
SEBASTIAN FL 32958

Mailing Address
318 BREAKWATER TERRACE
SEBASTIAN FL 32958

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number **65-0733662**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

VERNON, CHRIS A
318 BREAKWATER TERRACE
SEBASTIAN FL 32958

Name

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

City

FL

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.

SIGNATURE

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

(NOT

Registered Agent's 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!
After MAY 1, 2001
Fee IS \$150.00
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 NAME STREET ADDRESS CITY-ST-ZIP	PT VERNON, MICHAEL K 381 BREAKWATER TERR SEBASTIAN FL 32958	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS VERNON, CHRIS A 381 BREAKWATER TERR SEBASTIAN FL 32958	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 I am an officer or director of the corporation or the receiver or trustee empowered to execute this report; 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:

[Signature]
 PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DIRECTOR

Date

Daytime Phone #

5-21-2001 561-231-2451

Attachment

CHRISTOPHER P. TOMPKINS, P.A.
CERTIFIED PUBLIC ACCOUNTANT

Doc. # P97000015656
771339

601 21ST STREET, SUITE 300
VERO BEACH, FLORIDA 32960
TEL (561) 569-5762
FAX (561)-567-5990

May 16, 2001

FL Department of State
Uniform Business Report Filings
PO Box 1500
Tallahassee, FL 32302-1500

Re: Doctor Clean Commercial Cleaning, Inc.
FID #65-0733662

Dear Sir/Madam:

We are writing regarding the enclosed Uniform Business Report for 2001. This document was inadvertently enclosed in paperwork for the Form 1120S U.S. Corporate Income Tax Return that had to be extended due to an illness of the bookkeeper. We were quite surprised when we opened the tax documents and found the annual report included in the records. Since this was clearly a clerical error and not due to client neglect we respectfully request the late filing penalty be waived in full.

Thank you for your consideration in this matter.

Sincerely,



Christopher Tompkins CPA