

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 29, 2001 8:00 am**  
**Secretary of State**  
 03-29-2001 90020 026 \*\*\*150.00

0078272

**DOCUMENT # P97000032178**

1. Entity Name

**AMERICAN COMMERCIAL CLEANING INC.**

Principal Place of Business

Mailing Address

~~1186 LAMPLIGHTER DRIVE, N.W.~~  
~~PALM BAY FL 32907~~

~~1186 LAMPLIGHTER DRIVE, N.W.~~  
~~PALM BAY FL 32907~~

**734225**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

**1340 Clearmont ST. NE.**  
**Suite, Apt. #, etc.**  
**Ste 301**

**Same as New**  
**Principal Place**  
**of business**

**Palm Bay, FL**  
**City & State**

**Palm Bay, FL**  
**City & State**

4. FEI Number **59-3438848**

Applied For  
 Not Applicable

**32905**  
**USA.**  
**Zip Country**

**32905**  
**USA.**  
**Zip Country**

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

~~INFANTE, LUIS G~~  
~~1186 LAMPLIGHTER DRIVE, N.W.~~  
~~PALM BAY FL 32907~~

*Delete*

**Carlos J. Padilla**  
**1340 Clearmont ST NE**  
**Ste 301**  
**Palm Bay FL 32905**

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

**Carlos J. Padilla, President. 3-13-01**

(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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☐ Delete  
 NAME **PADILLA, CARLOS J**  
 STREET ADDRESS **1186 LAMPLIGHTER DRIVE, N.W.**  
 CITY-ST-ZIP **PALM BAY FL 32907**

TITLE ☒ Change ☐ Addition  
 NAME **1340 Clearmont ST. NE. Ste 301**  
 STREET ADDRESS **Palm Bay, FL 32905**  
 CITY-ST-ZIP **Palm Bay, FL 32905**

TITLE **VP** ☐ Delete  
 NAME **CRUZ, JULIA S**  
 STREET ADDRESS **1186 LAMPLIGHTER DRIVE, N.W.**  
 CITY-ST-ZIP **PALM BAY FL 32907**

TITLE ☒ Change ☐ Addition  
 NAME **1340 Clearmont ST. NE. Ste 301**  
 STREET ADDRESS **Palm Bay, FL 32905**  
 CITY-ST-ZIP **Palm Bay, FL 32905**

TITLE **S** ☐ Delete  
 NAME **PADILLA, OLGA I**  
 STREET ADDRESS **1186 LAMPLIGHTER DRIVE, N.W.**  
 CITY-ST-ZIP **PALM BAY FL 32907**

TITLE ☒ Change ☐ Addition  
 NAME **1340 Clearmont ST. NE. Ste 301**  
 STREET ADDRESS **Palm Bay, FL 32905**  
 CITY-ST-ZIP **Palm Bay, FL 32905**

TITLE **T** ☒ Delete  
 NAME **INFANTE, LUIS G**  
 STREET ADDRESS **1186 LAMPLIGHTER DRIVE, N.W.**  
 CITY-ST-ZIP **PALM BAY FL 32907**

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

TITLE **D** ☒ Delete  
 NAME **INFANTE, MARIA E**  
 STREET ADDRESS **1186 LAMPLIGHTER DRIVE, N.W.**  
 CITY-ST-ZIP **PALM BAY FL 32907**

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

TITLE ☐ Delete  
 NAME **Stella Alvarez**  
 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: **Stella Alvarez**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**3-13-01**  
 Date

**321-984-4443**  
 Daytime Phone #

CR2E034 (10/00)