

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 16, 2001 8:00 am
Secretary of State

05-16-2001 90205 004 ***150.00

DOCUMENT # P97000049475

1. Entity Name

SANI-KLEEN PRODUCTS, INC.

Principal Place of Business

**671 N E 4TH PLACE
HIALEAH FL 33010
US**

Mailing Address

**P O BOX 660462
MIAMI FL 33266-0462
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0782358

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

**PEREZ, JESUS JR
671 N E 4TH PLACE
HIALEAH FL 33010**

Name **JESUS C. PEREZ**

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

671 NE 4 PL.

City **HIALEAH**

FL

Zip Code **33010**

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 **JESUS PEREZ JR.**

5-1-01

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 **PEREZ, JESUS JR**
STREET ADDRESS **671 N E 4TH PLACE**
CITY-ST-ZIP **HIALEAH FL 33010**

TITLE **PRESIDENT** ☐ Change ☒ Addition
NAME **ALICIA PEREZ**
STREET ADDRESS **671 NE 4 PL.**
CITY-ST-ZIP **HIALEAH FL. 33010**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **JESUS C. PEREZ** ☐ Change ☒ Addition
NAME **VICE PRESIDENT/TREASURER**
STREET ADDRESS **671 NE 4 PL.**
CITY-ST-ZIP **HIALEAH, FL. 33010**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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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:

JESUS PEREZ
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/1/01
Date

305-698-3771
Daytime Phone #

CR2E034 (10/00)