

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jul 24, 2003 8:00 am**  
**Secretary of State**

07-24-2003 90112 023 \*\*\*150.00

0034653 AV

**DOCUMENT # P97000050737**

1. Entity Name

**ALL MANAGEMENT SERVICES, INC.**



Principal Place of Business

**2450 N POWERSHINE RD**

**STE 12**

**POMPANO BCH FL 33069**

**US**

Mailing Address

**2450 N POWERSHINE RD**

**STE 12**

**POMPANO BCH FL 33069**

**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

**65-0761857**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**WIDLANSKY, RICHARD**

**2450 N POWERSHINE RD**

**STE 12**

**POMPANO BCH FL 33069**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$550.00**

**After September 10, 2003 Fee will be \$750.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete  
NAME **D WIDLANSKY, RICHARD**  
STREET ADDRESS **2450 N POWERSHINE RD, 12**  
CITY-ST-ZIP **POMPANO BCH FL 33069**

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

12. 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 10 or Block 11 if changed, or on an attachment with an address: \_\_\_\_\_

SIGNATURE:

**SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-22-03

954-9742000

Date

Daytime Phone #

CR2E034 (4/03)



Attachment

90146156

PA7000050737

2450 N. Powerline Rd. #12

Ponpano Beach, FL 33069

(954) 974 7000

Fax: (954) 974 7433

**"Your Cleaning Connection"**

7/22/03

Florida Department of State,

Due to the fact that we did not receive the first notification for filing of the 2003 Uniform Business Report I request that the \$400.00 late fee be waived. During the first quarter of the year we experienced irregular mail delivery due to vandalism and other problems in the area.

I have completed the UBR form and submitted \$150.00 and hope this clears all matters regarding the 2003 Uniform Business Report.

Sincerely,

Richard Widlansky