2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF

SIGNATURE:

FILED DOCUMENT # P97000071572 Feb 26, 2000 8:00 am 1. Entity Name **Secretary of State** ABSOLUTELY BEST CLEANING, INC. 02-26-2000 90062 043 ***150.00 Principal Place of Business Mailing Address 1747 MANCHESTER DRIVE 1747 MANCHESTER DRIVE CLEARWATER FL 33756-1831 CLEARWATER FL 33756 2. Principal Place of Business 3. Mailing Address 1461 SONTHRIDGE 1461 SOUTHRIDGE DR Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State 4. FEI Number 59-3463163 PARWATER CLEARWARE Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired USA 37756 USA Fee Required 3*375*6 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent ZAMMITO AMERILAWYER CHARTERED Street Address (P.O. Box Number is Not Acceptable) 343 ALMERIA AVENUE CORAL GABLES FL 33134 3 8. The above named entity submits this statement for the purpose of changing its registered office or FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Change ☐ Addition TITLE TITLE Delete NAME BRITTAIN, REBECCA A NAME STREET ADDRESS STREET ADDRESS 1747 MANCHESTER DRIVE CITY-ST-ZIP CITY-ST-ZIP CLEARWATER FL 33756 ☐ Addition TITLE Change TITLE NAME BRITTAIN, RICHARD L NAME STREET ADDRESS STREET ADDRESS 1747 MANCHESTER DRIVE CITY-ST-ZIP CITY-ST-ZIP CLEARWATER FL 33756 PD, STD Res ZAMMITO, AICHARD C. 1461 SOVIHRIDGE DR ☐ Addition TITLE TITLE ☐ Delete NAME ZAMMITO, RICHARD C NAME STREET ADDRESS STREET ADDRESS 1747 MANCHESTER DRIVE CLEARWATER, Fl. 33756 CITY-ST-ZIP CITY-ST-7IP **CLEARWATER FL 33756** Change Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition □ Change □ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP [] Addition ☐ Delete TITLE Change TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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

RICHARD C. ZAMMITO