

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 18, 2001 8:00 am
Secretary of State
 05-18-2001 91551 046 ***150.00

DOCUMENT # P98000001887

1. Entity Name

STRAND & SON CLEANING, INC.

Principal Place of Business

Mailing Address

4211 S.W. 74TH AVENUE
 DAVIE FL 33314

4211 S.W. 74TH AVENUE
 DAVIE FL 33314

2. Principal Place of Business

Home

3. Mailing Address

HC4 Box 451

Suite, Apt. #, etc.

HC4 Box 451

Suite, Apt. #, etc.

City & State

Old Town Fla.

City & State

Fla.

Zip

32680

Country

Dixie

Zip

32680

Country

Dixie

4. FEI Number

65-0806993

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

STRAND, SONJIA L
 4211 S.W. 74TH AVENUE
 DAVIE FL 33314

7. Name and Address of New Registered Agent

Name

Sonjia Strand Zaffuto

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

HC4 Box 451

City

Old Town

FL

Zip Code

32680

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.

(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

TITLE ☐ Delete
 NAME D
 STREET ADDRESS STRAND, SONJIA L
 CITY-ST-ZIP 4211 S.W. 74TH AVENUE
 DAVIE FL 33314

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

TITLE ☐ Change ☐ Addition
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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:

Sonjia Strand Zaffuto
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-16-01

Date

Daytime Phone #

CR2E034 (10/00)