

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000003989

1. Entity Name
DIAZ CLEANING INC.

FILED
Jan 25, 2001 8:00 am
Secretary of State

01-25-2001 90135 012 ***150.00

Principal Place of Business
7108 HARBOR PT. BLVD.
ORLANDO FL 32835

Mailing Address
7108 HARBOR PT. BLVD.
ORLANDO FL 32835



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
803 Ferndell Rd
Suite, Apt. #, etc.

3. Mailing Address
803 Ferndell Rd
Suite, Apt. #, etc.

City & State
Orlando FL
Zip 32808 Country US

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Orlando FL
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4. FEI Number 59-3552226
Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DIAZ, FELIX
7108 HARBOR PT. BLVD.
ORLANDO FL 32835
803 Ferndell Rd
Orlando, FL 32808

7. Name and Address of New Registered Agent

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.

SIGNATURE _____ DATE 1-9-01
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
	DIAZ, FELIX	7108 HARBOR PT. BLVD.	ORLANDO FL 32835	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
	Felix Diaz	803 Ferndell Rd	Orlando, FL 32808	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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: Felix Diaz
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-9-01 (407) 296-4014
Date Daytime Phone #

CR2E034 (10/00)