

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

007871 AV

DOCUMENT # P99000016569

1. Entity Name  
KLEEN SWEEP SERVICES, INC.



FILED

03 AUG 21 PM 2:39

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



Principal Place of Business  
8360 W. OAKLAND PARK BLVD.  
SUNRISE FL 33351

Mailing Address  
8360 W. OAKLAND PARK BLVD.  
SUNRISE FL 33351

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 65-0915890

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

SCHACHTMAN, RHODA  
8360 WEST OAKLAND PARK BLVD.  
FORT LAUDERDALE FL 33351

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 *Rhoda Schachtman* Rhoda Schachtman, President 7-31-03  
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 NAME D SCHACHTMAN, RHODA  
STREET ADDRESS 8360 W. OAKLAND PARK BLVD.  
CITY-ST-ZIP SUNRISE FL 33351 ☐ Delete

TITLE NAME ☐ Change ☐ Addition  
STREET ADDRESS 400022529774  
CITY-ST-ZIP 08/25/03--01007--003 \*\*150.00

TITLE NAME ~~SCHACHTMAN, ROBERT~~ ☒ Delete  
STREET ADDRESS ~~8360 W. OAKLAND PARK BLVD.~~  
CITY-ST-ZIP ~~SUNRISE FL 33351~~

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

TITLE NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE NAME ☐ Delete  
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TITLE NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition  
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, with all other like empowered.

SIGNATURE: *Rhoda Schachtman* Rhoda Schachtman, President 7-31-03  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

954-270-

7000

Date Daytime Phone #

CR2E034 (4/03)

ATTACHMENT  
#P99000016569

KLEEN SWEEP SERVICES, INC.  
8360 W. OAKLAND PARK BLVD.  
SUNRISE, FL 33351

July 31, 2003

State of Florida  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

RE: UNIFORM BUSINESS REPORT  
KLEEN SWEEP SERVICES, INC.  
DOCUMENT# P99000016569  
FEI# 65-0915890


Dear Sir/Madame:

Please be advised that due to the untimely death of my husband, Robert Schachtman, who handled the operation of the business, I, Rhoda Schachtman while going through papers regarding the business came across the Uniform Business Report for 2003. Unfortunately, the deadline date of May 1, 2003 had already passed.

I therefore, would greatly appreciate that you accept this check in the amount of \$150.00 for the original fee with the signed report for the year 2003 for the reinstatement fee.

Thank you for your cooperation in this matter.

Sincerely,

  
Rhoda Schachtman  
President