

# 2001 UNIFORM BUSINESS REPORT (UBR)

B & M C

**FILED**  
**Jun 25, 2001 8:00 am**  
**Secretary of State**

05-18-2001 91595 025 \*\*\*150.00

75416

DO NOT WRITE IN THIS SPACE

<b>DOCUMENT #</b> P99000048757					
<b>1. Entity Name</b>					
B & M CLEANING SPECIALISTS, INC. <span style="float:right;">(LA)</span>					
<b>Principal Place of Business</b>			<b>Mailing Address</b>		
5911 RUBY WOODS TRAIL DOVER, FL 33527			5911 RUBY WOODS TRAIL DOVER, FL 33527		
<b>2. Principal Place of Business</b>			<b>3. Mailing Address</b>		
922 W. CHARLIE GRIFFIN			922 W. CHARLIE GRIFFIN		
<b>Suite, Apt. #, etc.</b>			<b>Suite, Apt. #, etc.</b>		
<b>City &amp; State</b>			<b>City &amp; State</b>		
PLANT CITY, FL			PLANT CITY, FL		
<b>Zip</b>		<b>Country</b>		<b>4. FEI Number</b>	
33565		USA		59-3491235	
<b>5. Certificate of Status Desired</b> <input type="checkbox"/>				<b>\$8.75 Additional Fee Required</b>	
<b>6. Name and Address of Current Registered Agent</b>					
FRED SEIFTER 107 S. PARSONS AVENUE BRANDON, FL 33511					
<b>7. Name and Address of New Registered Agent</b>					
Name GLENDA A. ROBERTS					
Street Address (P.O. Box Number is Not Acceptable) 922 W. CHARLIE GRIFFIN ROAD					
City PLANT CITY FL Zip Code 33565					
<b>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.</b>					
SIGNATURE <u>Glenda A. Roberts Owner</u> <span style="float:right;">6-17-01</span>					
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
<b>9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so.</b> <input type="checkbox"/> (See criteria on back)			<b>FILE NOW!!! FEE IS \$150.00.</b> <b>After MAY 1, 2001 Fee will be \$550.00</b> <b>Make Check Payable to Department of State</b>		
<b>10. Election Campaign Financing Trust Fund Contribution.</b> <input type="checkbox"/>			<b>\$5.00 May Be Added to Fees</b>		
<b>11. OFFICERS AND DIRECTORS</b>					
TITLE	B, C, S <input type="checkbox"/> Delete				
NAME	GLENDA A. ROBERTS				
STREET ADDRESS	922 W. CHARLIE GRIFFIN ROAD				
CITY - ST - ZIP	PLANT CITY, FL 33565				
TITLE	<input type="checkbox"/> Delete				
NAME					
STREET ADDRESS					
CITY - ST - ZIP					
TITLE	<input type="checkbox"/> Delete				
NAME					
STREET ADDRESS					
CITY - ST - ZIP					
TITLE	<input type="checkbox"/> Delete				
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CITY - ST - ZIP					
TITLE	<input type="checkbox"/> Delete				
NAME					
STREET ADDRESS					
CITY - ST - ZIP					
TITLE	<input type="checkbox"/> Delete				
NAME					
STREET ADDRESS					
CITY - ST - ZIP					
<b>12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>					
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
NAME					
STREET ADDRESS					
CITY - ST - ZIP					
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
NAME					
STREET ADDRESS					
CITY - ST - ZIP					
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
NAME					
STREET ADDRESS					
CITY - ST - ZIP					
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
NAME					
STREET ADDRESS					
CITY - ST - ZIP					
<b>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.</b>					
SIGNATURE: <u>Glenda A. Roberts</u> <span style="float:right;">4-30-01 (813) 763-0645</span>					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR <span style="float:right;">Date Daytime Phone #</span>					