## FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

P99000053174 **DOCUMENT #** 

Williams window Cleaning Inc.

## FILED Jul 04, 2002 8:00 am **Secretary of State**

07-04-2002 90559 001 \*\*\*300.00

DO NO	TC	WRITE	IN THIS	SPACE
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2. Principal Place of Business 3. Mailing Address 4621 SW 1621 SW 12th Suite, Apt. #, etc. Decijuld Boh Fl

96572

DO NOT WRITE IN THIS SPACE

Applied For Not Applicable

33442

5. Certificate of Status Desired

4. FEI Number

Fee Required

\$8.75 Additional

DO NOT WRITE IN THIS SPACE

Name			
Street Address (P.O. Box Number is Not Acceptab	ile)		
City	( <del>2</del> 0	Zip Code	_

7. Name and Address of Current Registered Agent

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.

(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)

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

OFFICERS AND DIRECTORS 11. TITLE Williams Scott. 4621 SW 121651 Deepled Ben Flagger NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP VP. TITLE TITLE Williams Adriana NAME STREET ADDRESS STREET ADDRESS 4671 SW 121h St Deerfuld Beh Fi CITY-ST-ZIP CITY-ST-ZIP TIT! F NAME NAME STREET ADDRESS STREET ADDRESS DO NOT WRITE CITY-ST-ZIP CITY-ST-ZIP TITLE IN THIS SPACE NAME NAME . STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE NAMÉ STREET ADDRESS STRÉET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

13. Thereby 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 on an attachment with an address, with all other like empowered.

dwgwi/Luns

ViaProjuent. 6/30/02 954-40-1444



4621 SW 12th Street Deerfield Beh, Fl 33442

954-426-1444

July 1, 2002

To whomever it may concern:

Every year your department mails UBI the forms to remind me to file the report. However this year you did not mail the files. Last year I E-file the report and I am wondering if you did not mail it because of that.

I know I am filing late but I hope you consider my arguments and allow me to pay only \$150.00. Please let me know if this is the case or do I need to pay extra. My e-mail address is www.swilibass@ AOL.com.

Sincerely,

Adriana Williams Vice-president

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