

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 27, 2001 8:00 am
Secretary of State

03-27-2001 90044 029 ***150.00

DOCUMENT # P99000094670

1. Entity Name

NINA'S JANITORIAL SERVICES, INC.

Principal Place of Business

**1380 FAIRWAY ISLAND DR
#1621
ORLANDO FL 32837**

Mailing Address

**PO BOX 770051
ORLANDO FL 32877-0051**

2. Principal Place of Business

11031 Sitting Place

3. Mailing Address

PO Box 770051

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Orlando, FLORIDA

City & State

Orlando, Florida

Zip

32825

Country

USA

Zip

32877-0051

Country

USA

4. FEI Number

59-3603700

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**NINA, JOSE F
13803 FAIRWAY ISLAND DR
#1621
ORLANDO FL 32837**

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

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 NAME ☐ Delete
PD NINA, JOSE F
STREET ADDRESS **13531 TEXAS WOODS CIRCLE**
CITY-ST-ZIP **ORLANDO FL 32824**

TITLE NAME ☐ Delete
V PATINO, NILDA
STREET ADDRESS **13803 FAIRWAY ISLAND DR #1621**
CITY-ST-ZIP **ORLANDO FL 32837**

TITLE NAME ☐ Delete
P NINA, JOSE F
STREET ADDRESS **13803 FAIRWAY ISLAND DR #1621**
CITY-ST-ZIP **ORLANDO FL 32837**

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME ☒ Change ☐ Addition
PD Nina, Jose F
STREET ADDRESS **11031 Sitting Place**
CITY-ST-ZIP **Orlando, FL 32825**

TITLE NAME ☒ Change ☐ Addition
V Patino, Nilda
STREET ADDRESS **11031 Sitting Place**
CITY-ST-ZIP **Orlando, FL 32825**

TITLE NAME ☒ Change ☐ Addition
P Nina, Jose F
STREET ADDRESS **11031 Sitting Place**
CITY-ST-ZIP **Orlando, FL 32825**

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

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

TITLE NAME ☐ Change ☐ Addition
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jose Nina

3-21-01

Date

(407) 857-0385

Daytime Phone #

CR2E034 (10/00)