

2001 UNIFORM BUSINESS REPORT (UBR)DOCUMENT # **P99000 110405**

1. Entity Name

JEFFREY FELIX JANITORIAL SERVICES, INC.**FILED**
Apr 26, 2001 8:00 am
Secretary of State

04-26-2001 90120 047 ***150.00

Principal Place of Business

Mailing Address

C0053154

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

605 SW 14 AVE

3. Mailing Address

SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

FORT LAUDERDALE, FL

City & State

4. FEI Number

65-0968944

Applied For

Not Applicable

Zip

33312

Country

USA

Zip

Country

5. Certificate of Status Desired

☐**\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

JEFFREY FELIX

Street Address (P.O. Box Number is Not Acceptable)

605 SW 14 AVE

City

FORT LAUDERDALE**FL**

Zip Code

33312

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 **JEFFREY FELIX**

Signature, typed or printed name of registered agent and title if applicable.

(Notarized agent signature required when re-registering)

DATE

4/18/019. 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 State10. 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 **PLS. / D** ☐ Delete
NAME **JEFFREY FELIX**
STREET ADDRESS **605 SW 14 AVE**
CITY-ST-ZIP **FORT LAUDERDALE, FL 33312**TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
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CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
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 **JEFFREY FELIX**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/18/01

Date

Daytime Phone #

954**-818-0253**

CR2E034 (11/00)