

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 16, 2002 8:00 am
Secretary of State

09-16-2002 90109 040 ***150.00

DOCUMENT # P99000111599

1. Entity Name

THE FINISHING TOUCH CLEANING CARE PROFESSIONALS, INC.

Principal Place of Business

P.O. BOX 61702

ST. PETERSBURG FL 33784

Mailing Address

P.O. BOX 61702

ST. PETERSBURG FL 33784

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

59-3649770

Applied For

Not Applicable

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

KENNEY, MAUREEN
21152 TED RD.
BROOKSVILLE FL 34601

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

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 \$550.00
After September 13, 2002 Fee will be \$750.00
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☐ Delete
NAME **KENNEDY, MAUREEN**
STREET ADDRESS **4117 24TH AVENUE NORTH**
CITY-ST-ZIP **ST. PETERSBURG FL 33713**

TITLE **D** ☒ Change ☐ Addition
NAME **KENNEY, MAUREEN**
STREET ADDRESS **21152 TED RD.**
CITY-ST-ZIP **BROOKSVILLE, FL 34601**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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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 REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/10/02 (727) 423-1696
Date Daytime Phone #

CR2E034 (4/02)

Attachment

678011

P99000111899

To Whom it may Concern

9/10/02

Please excuse the lateness of filing the enclosed report. This is my first notice that I have received for the 2002 UBR. I have checked with my accountant to see if she may have received it by mistake in with my other papers and she hadn't. I have made important changes in box 12. Thank you for your understanding in this matter. If you need to speak to me, please call me at (127) 423-1696.

Sincerely,

Maureen Kenney
President

MAUREEN KENNEY

21152 Ted Rd

BROOKSVILLE, FL 34601