

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # S66195

1. Entity Name

A PERFECTLY CLEAR SOLUTION, INC.

**FILED**  
**May 08, 2000 8:00 am**  
**Secretary of State**

05-08-2000 90073 004 \*\*\*150.00

Principal Place of Business

Mailing Address

1121 HOLLAND DR #13  
 BOCA RATON FL 33487

1121 HOLLAND DR #13  
 BOCA RATON FL 33487-2735

2. Principal Place of Business

3. Mailing Address

1121 Holland Dr

1121 Holland Dr

Suite, Apt. #, etc.

Suite, Apt. #, etc.

13

13

City & State

City & State

Boca Raton FL

Boca Raton FL

Zip

Country

Zip

Country

33431

W. P. B.

33431

W. P. B.

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CASSIDY, MARIE A  
 2241 NE 4TH COURT  
 BOCA RATON FL 33431

Name

Marie Cassidy

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

429 NE 34 St

City

Boca Raton FL

FL

Zip Code

33431

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 Marie Cassidy

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

(NOTE: Registered Agent signature required when reinstating)

4-25-2000

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, 2000 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

|                |                     |  |
|----------------|---------------------|--|
| TITLE          | P                   | <input type="checkbox"/> Delete            |
| NAME           | CASSIDY, MARIE      |  |
| STREET ADDRESS | 2251 NE 4TH COURT   |  |
| CITY-ST-ZIP    | BOCA RATON FL 33432 |  |
| TITLE          | VP                  | <input checked="" type="checkbox"/> Delete |
| NAME           | COPE, WAYNE         |  |
| STREET ADDRESS | 2251 NE 4TH COURT   |  |
| CITY-ST-ZIP    | BOCA RATON FL 33432 |  |
| TITLE          | T                   | <input type="checkbox"/> Delete            |
| NAME           | CASSIDY, MARIE      |  |
| STREET ADDRESS | 2251 NE 4TH COURT   |  |
| CITY-ST-ZIP    | BOCA RATON FL 33432 |  |
| TITLE          | S                   | <input checked="" type="checkbox"/> Delete |
| NAME           | WAYNE, COPE         |  |
| STREET ADDRESS | 2251 N.E. 4TH COURT |  |
| CITY-ST-ZIP    | BOCA RATON FL 33432 |  |
| TITLE          |                     | <input type="checkbox"/> Delete            |
| NAME           |                     |  |
| STREET ADDRESS |                     |  |
| CITY-ST-ZIP    |                     |  |
| TITLE          |                     | <input type="checkbox"/> Delete            |
| NAME           |                     |  |
| STREET ADDRESS |                     |  |
| CITY-ST-ZIP    |                     |  |

|                |                       |  |
|----------------|-----------------------|--|
| TITLE          | T                     | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME           | Marie Cassidy         |  |
| STREET ADDRESS | 429 NE 34 St          |  |
| CITY-ST-ZIP    | BOCA RATON, FL 33431  |  |
| TITLE          | VP                    | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME           | Nicole Hagmann        |  |
| STREET ADDRESS | 350 E. 24 St          |  |
| CITY-ST-ZIP    | Riviera Bch, FL 33404 |  |
| TITLE          | T                     | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME           | Marie Cassidy         |  |
| STREET ADDRESS | 429 NE 34 St          |  |
| CITY-ST-ZIP    | BOCA RATON, FL 33431  |  |
| TITLE          | S                     | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME           | Sec Marie Cassidy     |  |
| STREET ADDRESS | 429 NE 34 St          |  |
| CITY-ST-ZIP    | BOCA RATON, FL 33431  |  |
| 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    |                       |  |

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:

Marie Cassidy  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-25-2000 561 994 7677

Date

Daytime Phone #

CR2E034 (9/99)