## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## Sep 11, 2003 8:00 am Secretary of State V03787 DOCUMENT # 09-11-2003 90094 009 \*\*\*150.00 DIVERSIFIED JANITORIAL SERVICES, INC. Mailing Address 5508 N. 50TH ST Principal Place of Business 5508 N. 50TH ST SUITE 28 SUITE 28 **TAMPA FL 33610 TAMPA FL 33610** US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State 4. FEI Number City & State Applied For 59-3096308 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BALL, ALPHONSO JR. Street Address (P.O. Box Number is Not Acceptable) 1525 DOBY CIRCLE **TAMPA FL 33612** 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) FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing \$5.00 May Be After September 10, 2003 Fee will be \$750.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE TITLE ☐ Delete ☐ Addition Ball, Alphonso SR BALL, ALPHONSO JR NAME NAME 13661, CoRvardo DR 1525 DOBY CIR. STREET ADDRESS STREET ADDRESS TAMPA FL CITY-ST-ZIP > CITY-ST-ZIP DST TITLE -Change ☐ Delete TITLE Addition BALL, E. OPHELIA NAME NAME 1525 DOBY CIR STREET ADDRESS STREET ADDRESS CITY-ST-ZIF tampa fl CITY-ST-ZIP TITLE ☐ Delete □ Change TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Addition □ Change

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

NAME

STREET ADDRESS

CITY-ST-ZIP

NAME

STREET ADDRESS

CITY-ST-ZIP



"We're Proud Of What We Do & Take Pride In Doing It"

**SEPTEMBER 8, 2003** 

TO WHOM IT MAY CONCERN

WE DID NOT RECEIVE PRIOR NOTICE. WOULD YOU PLEASE WAIVE LATE FEE.

SINCERELY,

ALPHONSO BALL JR.

alphons Bally

**PRESIDENT**