

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # V25930

1. Entity Name
STEAMBOAT CARPET CLEANING, INC.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATION
04 JAN -9 PM 4:56

Principal Place of Business
2583 VICTORIA DR NE
PALM BAY, FL 32905 US

Mailing Address
2583 VICTORIA DR NE
PALM BAY, FL 32905 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01122004

Chg-P

CR2E034 (10/03)

4. FEI Number

59-3116238

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

MASON, JOAN
385 HIAWATHA WAY
MELBOURNE BEACH, FL 32951

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

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
MASON, MICHAEL F.
2480 LEWIS ST
MELBOURNE, FL 32901 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
MASON, CAROL A.
2480 LEWIS ST
MELBOURNE, FL 32901 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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

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☐ Delete

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

400025969754
01/14/04--01065--014 ☐ Change ☐ Addition

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.

SIGNATURE: *See attachment*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #



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Business Entity Name

STEAMBOAT-CARPET CLEANING, INC.

FEI Number

593116238

FEI Number Status

☐ Applied For ☐ Not Applicable ☒ CurrentCertificate of Status Desired ☐ Yes ☒ No \$8.75 each

Principal Place of Business

Address

2583 VICTORIA DR NE

Suite, Apt. #, etc.

City, State

PALM BAY

FL

Zip Code & Country

32905

US

Mailing Address

Address

2583 VICTORIA DR NE

Suite, Apt. #, etc.

City, State

PALM BAY

FL

Zip Code & Country

32905

US

Name And Address of Registered Agent

Name (Last, First, Middle, Title)

-or- RA Business Name

MASON, JOAN

Address

385 HIAWATHA WAY

Suite, Apt. #, etc.

City, State

MELBOURNE BEACH

FL

Zip Code & Country

32951

US

If Registered Agent (RA) is changed, the new RA must type their name in the 'Registered Agent Signature' block below. RA signature MUST be an individual name. If the RA is a business entity, an individual must sign on their behalf. A business entity cannot serve as its own RA.

Registered Agent Signature

3 4/4



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Business Entity Name

STEAMBOAT-CARPET CLEANING, INC.

Election Campaign Financing Trust Fund Contribution ☐ Yes ☒ No

Officer/Director Name And Address

Title

Name (Last, First, Middle, Title)

-or- Entity Name

Street Address

City, State

Zip Code & Country

Title

Name (Last, First, Middle, Title)

-or- Entity Name

Street Address

City, State

Zip Code & Country

Title

Name (Last, First, Middle, Title)

-or- Entity Name

Street Address

City, State

Zip Code & Country

Title

Name (Last, First, Middle, Title)

-or- Entity Name

4084

Street Address				
City, State				
Zip Code & Country				
Title				
Name (Last, First, Middle, Title)				
-or- Entity Name				
Street Address				
City, State				
Zip Code & Country				
Title				
Name (Last, First, Middle, Title)				
-or- Entity Name				
Street Address				
City, State				
Zip Code & Country				

☐ List more than six Officers/Directors ☒ No additional Officers/Directors to list

An individual named above must type their name in the 'Officer/Director Signature' block below. A corporate name is not allowed in this block.

Title	<input type="text" value="D"/>
Officer/Director Signature	<input type="text" value="Carol Mason"/>

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