

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 31, 2000 8:00 am
Secretary of State

05-31-2000 90023 049 ***150.00

DOCUMENT # V29105

1. Entity Name

Ashby Cleaning Service, Inc.

Principal Place of Business

374 S.W. Lancaster Ct.
 Port St. Lucie, Fl. 34984

Mailing Address

374 S.E. Lancaster Ave.
 Port St. Lucie, Fl. 34984

2. Principal Place of Business

102 S.W. Andover Ct.
 Suite, Apt. #, etc.

3. Mailing Address

1225 45th Court S.W.
 Suite, Apt. #, etc.

A0061813

DO NOT WRITE IN THIS SPACE

City & State
 Port St. Lucie, Fla.

Zip
 34953

Country

City & State
 Vero Beach, Florida

Zip
 32968

Country

4. FEI Number

65-0325788

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

Kistler, John P. Jr.
 1225 45th Court S.W.
 Vero Beach, Fla. 32968

7. Name and Address of New Registered Agent

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.

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 \$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

TITLE PT ☐ Delete

NAME Billy Sparks
 STREET ADDRESS 102 S.W. Andover Court
 CITY-ST-ZIP Port St. Lucie, Fl. 34953

TITLE VPS ☐ Delete

NAME Vernice Sparks
 STREET ADDRESS 102 S.W. Andover Court
 CITY-ST-ZIP Port St. Lucie, Fl. 34953

TITLE ☐ Delete

NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete

NAME
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 CITY-ST-ZIP

TITLE ☐ Delete

NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete

NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition

NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

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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: Bill Sparks, Bill Sparks, President 04/21/2000 (561) 879-0465

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)