

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # V63551

1. Entity Name

ACE WINDOW CLEANING, INC.

FILED
Mar 24, 2000 8:00 am
Secretary of State

03-24-2000 90063 021 ***150.00

Principal Place of Business

1859 N. PINE ISLAND RD.
SUITE #253
PLANTATION FL 33322

Mailing Address

1859 N. PINE ISLAND RD.
SUITE #253
PLANTATION FL 33322-5224

2. Principal Place of Business

4846 N. UNIVERSITY DR.

3. Mailing Address

4846 N. UNIVERSITY DR.

Suite, Apt. #, etc.

SUITE 145

Suite, Apt. #, etc.

SUITE 145

City & State

LAUDERHILL, FL

City & State

LAUDERHILL, FLA

Zip

33351

Country

USA

Zip

33351

Country

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0362807

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BLINDER, MAX
1172 N. UNIVERSITY DRIVE
PLANTATION FL 33322

7. Name and Address of New Registered Agent

Name

ABROTSKY, MARC

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

11153 NW 38TH PL

City

SUNRISE, FLA

FL

Zip Code

33351

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

Max Abrotsky

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 **P** ☒ Delete
NAME **BLINDER, MAX**
STREET ADDRESS **1172 N. UNIVERSITY DRIVE**
CITY-ST-ZIP **PLANTATION FL 33322**

TITLE **S** ☐ Delete
NAME **ABROTSKY, MARC**
STREET ADDRESS **11153 NW 38TH PLACE**
CITY-ST-ZIP **SUNRISE FL 33351**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
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 **P** ☒ Change ☐ Addition
NAME **MARC ABROTSKY**
STREET ADDRESS **11153 NW 38TH PL.**
CITY-ST-ZIP **SUNRISE, FL 33351**

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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TITLE ☐ Change ☐ 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:

Max Abrotsky
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3-7-00 (954) 424-8452

CR2E034 (9/99)