

**2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F04000002802

**FILED**  
**Apr 15, 2013**  
**Secretary of State**  
**CC7510344681**

**Entity Name:** UNICCO SERVICE OF N.J., INC.

**Current Principal Place of Business:**

C/O UNICCO SERVICE COMPANY  
275 GROVE STREET  
AUBURNDALE, MA 02466

**Current Mailing Address:**

C/O UNICCO SERVICE COMPANY  
275 GROVE STREET  
AUBURNDALE, MA 02466

**FEI Number:** 04-3410467

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

*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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title P  
Name KECHES, GEORGE A  
Address 275 GROVE STREET, STE. 3-200  
City-State-Zip: AUBURNDALE MA 02466

Title T  
Name LAWLOR, JAMES E  
Address 275 GROVE STREET, STE. 3-200  
City-State-Zip: AUBURNDALE MA 02466

Title S  
Name EUSTACE, VANESSA A  
Address 275 GROVE STREET, STE. 3-200  
City-State-Zip: AUBURNDALE MA 02466

Title DIR  
Name LEUPEN, RICHARD A  
Address 275 GROVE STREET, STE. 3-200  
City-State-Zip: AUBURNDALE MA 02466

Title DIR  
Name SHIBUYA, ROBERT K  
Address 275 GROVE STREET, STE. 3-200  
City-State-Zip: AUBURNDALE MA 02466

Title ATRE  
Name MOLITO, JOSEPH  
Address 275 GROVE STREET, STE 3-200  
City-State-Zip: AUBURNDALE MA 02466

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** JOSEPH MOLITO

ATRE

04/15/2013

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date