

PEOPLE'S CHOICE PRESSURE CLEANING, INC.

4341 SW 73rd TERRACE DAVIE, FL 33314 OFFICE: 954-445-8033

Email: <u>h2opressure@bellsouth.net</u> Website: <u>https://allpeopleschoice.com/</u>

CITY OF COCONUT CREEK RFP NO. 08-27-25-11 PRESSURE CLEANING SERVICES

DUE DATE/TIME Wednesday, August 27, 2025 at 11:00 AM ET

CITY OF COCONUT CREEK PRESSURE CLEANING SERVICES RFP NO. 08-27-25-11

SCHEDULE OF PROPOSAL PRICES

PROPOSER SHALL SUBMIT PRICES ELECTRONICALLY THROUGH THE EBID SYSTEM "LINE ITEMS" TAB

https://coconutcreek.ionwave.net/

Item	Description	Estimated Quantities	Unit	Price per Unit	Estimated Total
1	Curbs	400,000	LF	0.07	28,000.00
2	Medians (includes concrete/paver surfaces)	170,000	SF	0.10	17,000.00
3	Sidewalks / Concrete Walkways	300,000	SF	0.05	15,000.00
4	Pavers	100,000	SF	0.06	6,000.00
5	Wheel Stops	1,000	EA	1.00	1,000.00
6	Paver Sealing	400,000	SF	0.35	140,000.00
7	Ceramic/Concrete Roof Tile	280,000	SF	0.09	25,200.00
8	Boardwalks	10,800	SF	0.10	1,080.00
9	Building Walls	335,000	SF	0.08	26,800.00
Grand Total (Items 1 through 9)			\$260,080.00		

http://www.allpeopleschoice.com





People's Choice Pressure Cleaning & Painting, Inc.







Our Story

We are South Florida's Pressure Cleaning, Painting & Window Cleaning Experts for over 25 years!

People's Choice, located in Fort Lauderdale, FL, provides pressure cleaning, window cleaning high quality painting services to businesses, residential communities, and municipalities in South Florida.

Some of our work includes:

• High rise buildings, parking garages, public spaces, parks, schools, Police Department buildings, City Halls, Waste Services, Corrections Buildings, sidewalks, curbs, medians, etc.

We have an Aerial Work Platform Safety Certificate, a MOT Work Zone Advanced Traffic Control Certificate, license in painting, to provide our services safely and legally. People's Choice is your best option for clean, reliable cleaning and painting of your business.

Our experienced office staff prepares bids, billing, certificates of insurance, and required forms to meet your needs.

We are A+ rated with the Better Business Bureau (BBB)

What We Do

Painting Contractors

- ▶ Painting Commercial/Residential
- ▶ Sealing
- ▶ Residential Pressure Cleaning
- ▶ Pressure Cleaning Commercial
- ▶ Graffiti Removal ▶ Residential Window
- Washing
- ▶ Window Washing Commercial
- ▶ Interior/Exterior Painting
- ▶ Pressure Washing-Roofs & Garages

Building Cleaning Contractors--Exterior

Sealing

Washing

- ▶ Graffiti Removal
- ▶ Pressure Washing-Roofs & Garages
- ▶ Residential Pressure Cleaning
- ▶ Pressure Washing-Sidewalks

Project Experience

▶ Residential Window

Service Sector: Project Size:

From \$500 to \$250,000

▶ Hospital / Nursing Home

Commercial

- ▶ School / College / University
- ▶ Retail Store
- ▶ Athletic Field
- ▶ Church / Synagogue
- ▶ Court House
- ▶ Gas Station ▶ Hotel / Motel
- ▶ Bank
- City / Town Hall

▶ Airport Runway

- ▶ Education (K-12)
- ▶ Government
- ▶ House

- ▶ Misc Project
- ▶ Apartments & Condominiums
- ▶ Bridge
- ▶ Club House / Community Center
- ▶ Fire / Police Station
- ▶ Grocery Stores

Featured Projects



City of Weston monuments Weston, FL



City of Hollywood **Broadwalk** Hollywood, FL



Galleria Mall Fort Lauderdale, FL



Mizner Park Boca Raton, FL



Solid Waste Authority of Palm Beach West Palm Beach, FL

Company Information

Year Established: 1999 Bondable:

Annual Volume: \$500,000 - \$1 million

Key Contacts

Steve Landis - President (954) 445-8033

Licenses

▶ 039-18-00003414 - BROWARD COUNTY LOCAL BUSINESS TAX RECEIPT: County of Broward ▶ 200119594 - PALM BEACH COUNTY LOCAL

BUSINESS TAX: PALM BEACH COUNTY

Insurance Coverage

▶ Alan B. Edwards: Angie Rodriguez

Auto Liability: \$1,000,000

Auto Ins Plus Inc dba: Florida JUA

Worker's Compensation: \$1,000,000

▶ Joseph D. Walters: Joan Neu

General Liability: \$1,000,000

Service Areas



Image Gallery











School



School



Broward County School

Broward County School







Mixed Use: City of Hollywood Broadwalk



Broadwalk



Mixed Use: City of Hollywood Broadwalk



Mixed Use: City of Hollywood Broadwalk



City of Weston



City of Weston



City of Weston



City of Weston



City of Weston

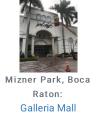


Galleria Mall Fort Lauderdale: Galleria Mall



Galleria Mall Fort Lauderdale: Galleria Mall





RESOURCES AND AVAILABILITY

Management Plan & Staffing Configuration

People's Choice Pressure Cleaning is structured for efficiency, responsiveness, and safety. Our leadership team brings hands-on experience in municipal and commercial pressure cleaning, ensuring that every project is executed with precision and professionalism. Operations are managed from our Davie, FL headquarters, where scheduling, compliance tracking, and client coordination are handled by dedicated project leads. Field crews are composed of certified technicians trained in high-rise and ground-level pressure cleaning, as well as window washing. We maintain a scalable workforce that allows us to respond quickly to urgent requests, seasonal demands, and multi-location service needs throughout South Florida. This flexible staffing model ensures consistent quality and timely delivery across all contract types.

Safety Protocols

Safety is central to our operations. All staff are OSHA-conscious and follow strict safety protocols tailored to each site. All field staff adhere to site-specific safety plans, including PPE usage, traffic and pedestrian control, ladder and lift protocols, and chemical handling procedures. We conduct regular safety briefings and equipment inspections, and our teams are trained in fall protection, confined space awareness, and environmental compliance. Our commitment to safety has earned us repeat contracts with municipalities such as City of Hollywood, Delray Beach, and Miami Gardens.

Owned Equipment and Major Tools

People's Choice maintains a robust inventory of commercial-grade equipment and tools, including:

- High-pressure hot and cold-water systems (truck-mounted and portable). Our pumps provide both low and high PSI, up to 4000 at 8 gallons per minute
- Soft wash systems for delicate surfaces
- Industrial-grade lifts and scaffolding for hi-rise access
- Surface cleaners for sidewalks, pool decks, and driveways
- Owned Arrow board
- Owned Traffic cones
- Safety gear, signage, and traffic control kits

All equipment is owned, maintained in-house, and deployed by trained personnel. Our readiness and capacity allow us to mobilize quickly and meet the demands of large-scale municipal contracts.

REFERENCES WITHIN THE LAST FIVE (5) YEARS:

1. Miami Gardens

18605 NW 27th Ave, Miami Gardens, Fl

Contact: Brandon Morris PHONE: 786-707-0029

EMAIL: bmorris@miamigardens-fl.gov Years of Service: 2014 to present

Pressure cleaning exterior building public works buildings, parks and city areas.

2. Galleria Mall, Fort Lauderdale

Galleria Mall at Fort Lauderdale - 2414 E. Sunrise Blvd., Ft. Lauderdale, FL 33304

Contact: Erich Pike, Property Manager

PHONE: 954-564-1036

EMAIL: erich.pike@am.jll.com Years of Service: 2008 to present

Pressure cleaning exterior building, parking garages and entrance way paver.

3. Cartman Commercial Services

11763 SW 92nd Lane, MIAMI, FL, 33186

Contact: Chad Bethel, Director

PHONE: 305-389-5794

EMAIL: chad@powersweeping.us Years of Service: 2010 to present

Pressure cleaning garages throughout city areas.

4. Federal Realty Property Management

7015 Beracasa Way Suite 206 Boca Raton, Fl 33433

Contact: Debbie Herman, Property Manager

PHONE: 561-347-5521

EMAIL: dherman@federalrealty.com Years of Service: 2019 to present

Pressure cleaning multiple office locations and shopping centers- roofs, sidewalks, curbs and swales, parking lots

5. Professional Building Services

7027 W. Broward Blvd., 303, Plantation, FL 33317

Contact: Craig Saxner, President

PHONE: 954-473-0025

EMAIL: craigsaxner@gmail.com Years of Service: 2011 to present

Pressure cleaning exterior curbs, medians, sidewalks, gutters, roofs to assigned community properties.

6. Stiles Property Management

3700 Lakeside Drive, Suite 104, Miramar, FL 33027 Contact: Megan Purdue (Sawgrass Corp. Plaza)

PHONE: 954-846-0883

EMAIL: megan.purdue@stiles.com Years of Service: 2014 to present

Pressure clean multiple office location and shopping centers- roofs, sidewalks, curbs and swales, parking lots, dumpster and compactor areas on monthly, quarterly and annual schedule.

Proposer Information

Communications concerning	ng this proposal shall be	addressed to:	
Company Name:	Peoples Choice Pressure	e Cleaning, Inc.	
Social Security/Federal Ta	x I.D. No.: 65-0959200	0	
Proposer's Name (Print):	Steven Landis	Title: President	_
Address:	4341 SW 73rd Ter		
City/State/Zip:	Davie, FL 33314		
Phone:	954-445-8033	Fax:	
Email:	h2opressure@bellsout	:h.net	
	ACKNOWLEDGE	EMENT OF ADDENDA	
Inst	ructions: Complete Pa	art I or Part II, Whichever Applies	
Part I:			
Proposer has examined co which is hereby acknowled	•	Documents and of the following Addenda (rec	eipt of all
	Addendum No:	Dated:	
Part II:			
No Addendum was re	eceived in connection wi	ith this RFP.	
make awards on all items irregularities in the proposa agreed by the Proposer that no property interest of	s or any items accordir al or in the proposals rec at by submitting a propos or legal right of any kir	City reserves the right to reject any and all proping to the best interest of the City, and to we ceived as a result of the RFP. It is also undersal, Proposer shall be deemed to understand and shall be created at any point during the intract has been agreed to and signed by both	vaive any stood and and agree aforesaid
Proposer's Authorized Sign	nature		-
Steven Landis, Presiden			
Proposer's Printed Name			

00/10/2025

Proposal Confirmation

In accordance with the requirements to provide Pressure Cleaning Services pursuant to RFP No. 08-27-25-11, the undersigned submits the attached proposal.

Proposer accepts and hereby incorporates by reference in this proposal all of the terms and conditions of the scope of work, including EPA Standards, Motor Vehicle Safety Standards and required warranty and guarantee certificates.

Proposer is fully aware of the scope of work based on these requirements, the legal requirements (federal, state, county and local laws, ordinances, rules and regulations) and the conditions affecting cost, progress or performance of the work and has made such independent investigation as Proposer deems necessary.

This proposal is genuine and not made in the interest of or on behalf of any undisclosed person, firm or corporation and is not submitted in conformity with any agreement or rules of any group, association, organization or corporation; Proposer has not directly or indirectly induced or solicited any other Proposer to submit a false or sham proposal; Proposer has not solicited or induced any person; firm or a corporation to refrain from proposing and Proposer has not sought by collusion to obtain for himself any advantage over any other Proposer or over City.

The Proposer shall acknowledge this Proposal by signing and completing the spaces provided. I hereby submit this Proposal Package for Pressure Cleaning Services, RFP No. 08-27-25-11 to the City of Coconut Creek with the full understanding of the Request for Proposal, General Terms and Conditions, Special Terms and Conditions, Detailed Requirements, and the entire Proposal Package.

Peoples Choice Pressure Cleaning, Inc.		00/10/2023
Proposer's Name	Signature	Date
State of: Florida		
County of: Broward		
The foregoing instrument was acknowledged by Steven Landis		August , 2025, nally known to me or who
has produced	as identification and who	o did (did not) take an oath.
Notary Public Signature Amede M Jacques Notary Name, Printed, Typed or Stamped	Notary Public Commission My Comm. Exp	M. JACQUES - State of Florida n # HH 397332 lires May 11, 2027
Commission Number: ## 397332	Ser ced unough Nat	tional wotary Assn.
My Commission Expires: May 11 200	50	

Indemnification Clause

(Page 1 of 1)

The parties agree that one percent (1%) of the total compensation paid to Contractor for the work of the contract shall constitute specific consideration to Contractor for the indemnification to be provided under the Contract. The Contractor shall indemnify and hold harmless the City Commission, the City of Coconut Creek, and its agents and employees from and against all claims, damages, losses and expenses including attorney's fees arising out of or resulting from the performance of the work provided that any such claim, damage, loss or expense (1) is attributable to bodily injury, sickness, disease or death, or to injury to or destruction of tangible property (other than the work itself) including the loss of use resulting therefrom, and (2) is caused in whole or in part by any negligent act or omission of the Contractor, any subcontractor, anyone directly or indirectly employed by any of them or anyone for whose acts any of them may be liable, regardless of whether or not it is caused in part by a party indemnified hereunder.

In any and all claims against the City, or any of their agents or employees by any employee of the Contractor, any subcontractor, anyone directly or indirectly employed by any of them or anyone for whose acts any of them may be liable, the indemnification obligation under this Paragraph shall not be limited in any way by any limitation on this amount or type of damages compensation or benefits payable by or for the Contractor or any subcontractor under Workers' Compensation Acts, Disability Benefit Acts or other Employee Benefit Acts. Nothing in this section shall affect the immunities of the City pursuant to Chapter 768, Florida Statutes, as amended from time to time, nor shall it constitute an agreement by the City to indemnify Contractor, its officers, employers, subcontractors or agents against any claim or cause of action. This section shall not be construed as consent to be sued by any third parties in any matter arising out of this Agreement. The foregoing indemnification and release shall survive the termination of this Agreement.

Peoples Choice Pressure Cleaning, Inc.	08/18/2025
Contractor's Name Sign	ature Date
State of: Florida County of: Broward	
The foregoing instrument was acknowledged before	ore me this 18 day of August
2025, by Steven Landis	, who is (who are) personally known to me or
who has produced	as identification and who did (did not) take an
oath.	
Ag	
Notary Public Signature	AMEIDE M. JACQUES Notary Public - State of Florida
Amesde M. Jacques Notary Name, Printed, Typed or Stamped	Commission # HH 397332 My Comm. Expires May 11, 2027 Sorced through National Notary Assn.
Commission Number: HH 397 332	
11 0 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	

Non-Collusive Affidavit

State o	of Florida)	,	
County	of Broward))ss.	
	Steven Landis		being first duly sworn, deposes and says that:
(1)	He/she is the President (Owner, of Peoples Choice Pressure Cleproposal;	Partner, Officer, Repre eaning, Inc.	sentative or Agent) the Proposer that has submitted the attached
(2)	He/she is fully informed resp pertinent circumstances res		and contents of the attached proposal and of all
(3)	Such proposal is genuine ar	nd is not a collusive or s	ham proposal;
(4)	employees or parties in in connived or agreed, directly collusive or sham proposal submitted; or to refrain from or indirectly, sought by agree firm or person to fix the price overhead, profit, or cost eler	terest, including this a y or indirectly, with any in connection with the webidding in connection we ment or collusion, or collusion, or collusion, or the attachments of the proposal prollusion, conspiracy, con	s, partners, owners, agents, representatives, ffiant, have in any way colluded, conspired, other Proposer, firm, or person to submit a vork for which the attached proposal has been with such work; or have in any manner, directly mmunication, or conference with any Proposer, ed proposal of any other Proposer, or to fix an ice or the proposal price of any other Proposer, nivance, or unlawful agreement any advantage proposed work;
(5)	collusion, conspiracy, conni-	vance, or unlawful agree	are fair and proper and are not tainted by any ement on the part of the Proposer or any other r parties in interest, including this affiant.

Signed, sealed and delivered in the presence of:	1, 1
in the presence of.	
Shali Clurk	By: #
Lamai	Steven Landis
/	(Printed Name)
	President (Title)
	(Me)
ACKNOWLEDGEMENT	
State ofFlorida	
County of Broward	
The foregoing instrument was acknowledged by Steven Landis	day of Accust, 2025, who is personally known to me or who has produced as identification and who did (did not) take an oath.
WITNESS my hand and official seal	
NOTARY PUBLIC	AMEIDE M. JACQUES Notary Public - State of Florida Commission # His 397332 My Comm. Expires May 11, 2027 Bonced through National Notary Assn.
(Name of Notary Public: Print, Stamp, or Type as Commissioned.)	
Type as Commissioned.)	

Proposer's Qualification Statement

In order to properly evaluate the proposal submittals, Proposers are expected to complete the questionnaire and include the following documentation. By attesting to this submittal, Proposer guarantees the truth and accuracy of all statements and answers herein contained.

City of Coconut Creek

SUBMITTED TO:

		Procurement Division 4800 West Copans Road	
		Coconut Creek, FL 33063	<u>Check One</u>
Submitte	d Bv:	Peoples Choice Pressure Cleaning, Inc.	<u>Check One</u> ☑ Corporation
Name:		Steven Landis	□ Partnership
Address:		12.11 SW 72rd Tor	 □ Individual
City, Stat		Davie, FL 33314	□ Other
Telephon		954-445-8033	
Fax No.	ic 140		
ax INU.			
		ue, exact, correct and complete name of the which you do business and the address of	
Tł	he correct	name of the Proposer is: Peoples Choice P	ressure Cleaning, Inc.
_			
Tł	he addres	s of the principal place of business is: 4341	SW 73rd Ter, Davie FL 33314
_			
2. If	Proposer	is a corporation, answer the following:	
	·	Incorporation: 1000	
		In a un a unition . Ela vida	
		nt's Name: Steven Landis	
		esident's Name:	
		ry's Name: Sheila Clark	
f.		er's Name:	
		nd Address of Resident Agent: Steven Land	
3. If	Proposer	is an individual or a partnership, answer the	following:
a.	Date of	Organization:	
b.	Name,	Address and Ownership Units of all Partners	:
C.	State w	nether general or limited partnership:	

If Proposer is operating under a fictitious name, submit evidence of compliance with the Flori Fictitious Name Statute. How many years has your organization been in business under its present business name? 26 Under what other former name has your organization operated? n/a Indicate registration, license numbers or certificate numbers for the businesses or profession which are the subject of this proposal. Please attach certificate of competency and/or staregistration.
How many years has your organization been in business under its present business name? 26 Under what other former name has your organization operated? n/a Indicate registration, license numbers or certificate numbers for the businesses or profession which are the subject of this proposal. Please attach certificate of competency and/or staregistration.
Under what other former name has your organization operated? n/a Indicate registration, license numbers or certificate numbers for the businesses or profession which are the subject of this proposal. Please attach certificate of competency and/or staregistration.
Indicate registration, license numbers or certificate numbers for the businesses or profession which are the subject of this proposal. Please attach certificate of competency and/or staregistration.
which are the subject of this proposal. Please attach certificate of competency and/or started
SunBiz Document P99000098701; Broward County Business License Receipt # 325-17029
relative to providing Pressure Cleaning Services that have occurred within the last three (3) year Also indicate if your firm has been debarred or suspended from bidding or proposing on procurement project by any government during the last five (5) years. n/a
Have you ever failed to complete any work awarded to you? If so, state when, where and why? No
List the pertinent experience of the key individuals of your organization (continue on insert sheet necessary). Steven Landis, President: Overall company and project management; Greg Terwilliger-MOT
Sheila Clark, Office Manager: Handles all estmates, invoicing and certification of insuarance
Cory Chaples: Lead pressure cleaning; Ensures job site safety, equipment maintenance, and client satisfathrough clear communication and quality control.
State the name of the individual(s) and titles who will personally supervise the work:
Steven Landis, President and Cory Chaples, Lead pressure washer

	ard Boulevard, Suite 41	0		
Plantation, FL 33	324			
	(5%) of the Propose		individuals who owr icate the percentage	
State the names, by Proposer: Peoples Choice I		type of business of a	all firms that are parti	ially or wholly o
4341 SW 73rd T	er., Davie FL 33314			
Painting compa	ny			
State the name of agent:		hich will be providing	g the bond, and the r	name and addro
agent:		•		name and addr
agent:		•		name and addr
agent:	information concer ompleted projects o co-ventures.)	ning all Proposer's		ss as of the d
List the following submission and c information for all	information concer ompleted projects o co-ventures.)	ning all Proposer's ver the last five (5) y Total Contract	contracts in progres years. (In case of an Contracted Date	ss as of the day co-venture, li % of Comple to Date
List the following submission and coinformation for all	information concer ompleted projects o co-ventures.) Owner Castle Group	rning all Proposer's ver the last five (5) y Total Contract <u>Value</u>	contracts in progres years. (In case of an Contracted Date of Completion	ss as of the day by co-venture, li % of Comple

19.	Do you h	nave a comp	plete set of documents, including drawings and	d addenda, if applicable?
	Yes 🕅	No □		
20.	Did you	attend the p	re-proposal conference if any such conference	e was held?
	Yes 🕱	No □	No Conference Held □	
21.	Bank Re	eferences:		
		Bank	Address/City/State/Zip	Telephone
		TD bank	5943 Stirling Road, Davie, FL 33314	(954) 791-1533
Qual warn the F	ification St anted by Pr Proposer's	atement shoro roposer to be qualification	ges and understands that the information of all be relied upon by City in awarding the content of the true. The discovery of any omission or miss to perform under the contract shall cause the and terminate the award and /or contract.	ontract and such information is statement that materially affects
		1 1		08/18/2025
Prop	oser's Sign	ature		Date

Proposer's Qualification Statement Acknowledgement

State of Pland	C	
County of Brace	ard	
On this the the State of Florida, Pe	day of August, 2025, rsonally appeared	before me, the undersigned Notary Public of
	Steven Landis	And
	(Name(s) of individual(s) who appear	
whose name(s) is/are S executed it.	Subscribed to within the instrument, a	nd he/she/they acknowledge that he/she/they
WITNESS my hand and	d official seal.	
NOTARY PUBLIC		NOTARY PUBLIC, STATE OF FLORIDA
SEAL OF OFFICE:	AMEIDE M. JACQUES Notary Public - State of Florida Commission = Hri 397332 My Comm. Expires May 11, 2027 Bonded through National Notary Assn.	Ameide M. Jacques (Name of Notary Public: Print, Stamp, or Type as Commissioned)
		Personally known to me, or Produced identification
		(Type of Identification Produced)
		☐ DID take an oath, or ☐ DID NOT take an oath

Drug-Free Workplace Form

time to	idersigned vendor in accordance with Section 287.087, Florida Statutes as may be amended from time, hereby certifies that Peoples Choice Pressure Cleaning, Inc. does: of Business)
1.	Publish a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the workplace and specifying the actions that will be taken against employees for violations of such prohibition.
2.	Inform employees about the dangers of drug abuse in the workplace, the business's policy of maintaining a drug-free workplace, any available drug counseling, rehabilitation, and employee assistance programs, and the penalties that may be imposed upon employees for drug abuse violations.
3.	Give each employee engaged in providing the commodities or contractual services that are under bid a copy of the statement specified in subsection (1).
4.	In the statement specified in subsection (1), notify the employees that, as a condition of working on the commodities or contractual services that are under bid, the employee will abide by the terms of the statement and will notify the employer of any conviction of, or plea of guilty or nolo contendere to, any violation of Florida Statutes, Chapter 893 or of any controlled substance law of the United States or any state, for a violation occurring in the workplace no later than five (5) days after such conviction.
5.	Impose a sanction on, or require the satisfactory participation in a drug abuse assistance or rehabilitation program if such is available in the employee's community, by any employee who is so convicted.
6.	Make a good faith effort to continue to maintain a drug-free workplace through implementation of this section.
	person authorized to sign the statement, I certify that this firm complies fully with the above ments.
<u> dti</u>	Peoples Choice Pressure Cleaning, Inc. 08/18/2025

Company Name

Proposer's Signature

Date

Sworn Statement On Public Entity Crimes Under Florida Status Chapter 287.133(3)(a).

THIS FORM <u>MUST</u> BE SIGNED IN THE PRESENCE OF A NOTARY PUBLIC OR OTHER OFFICER AUTHORIZED TO ADMINISTER OATHS.

1.	This sworn statement is submitted with RFP No. 08-27-25-11 for Pressure Cleaning Services.
2.	Peoples Choice Pressure This sworn statement is submitted by Cleaning, Inc. (name of entity submitting sworn statement) whose business address is 4341 SW 73rd Ter, Davie, FL 33314 and (if applicable) its Federal Employer Identification Number (FEIN) is 65-0959200 . (If the entity has no FEIN, include the Social Security Number of the individual signing this sworn statement:)
3.	My name is steven Landis and my (Please print name of individual signing)
	relationship to the entity named above is President .
4.	I understand that a "public entity crime" as defined in Paragraph 287.133(1)(g), Florida Statutes, means a violation of any state or federal law by a person with respect to and directly related to the transaction of business with any public entity or with an agency or political subdivision of any other state or with the United States, including, but not limited to, any bid or contract for goods or services to be provided to any public entity or an agency or political subdivision of any other state or of the United States and involving antitrust, fraud, theft, bribery, collusion, racketeering, conspiracy, or material misrepresentation.
5.	I understand that a "convicted" or "conviction" as defined in Paragraph 287.133(1)(b), <u>Florida Statutes</u> , means a finding of guilt or a conviction of a public entity crime, with or without an adjudication of guilt, in any federal or state trial court of record relating to charges brought by indictment or information after July 1, 1989, as a result of a jury verdict, nonjury trial, or entry of a plea of guilty or nolo contendere.
6.	I understand that an "affiliate" as defined in Paragraph 287.133(1)(a), Florida Statutes, includes

1. A predecessor or successor of a person convicted of a public entity crime: or

but is not limited to:

- 2. An entity under the control of any natural person who is active in the management of the entity and who has been convicted of a public entity crime. The term "affiliate" includes those officers, directors, executives, partners, shareholders, employees, members, and agents who are active in the management of an affiliate. The Ownership by one person of shares constituting a controlling interest in another person, or a pooling of equipment or income among persons when not for fair market value under an arm's length agreement, shall be a prima facie case that one person controls another person. A person who knowingly enters into a joint venture with a person who has been convicted of a public entity crime in Florida during the preceding thirty-six (36) months shall be considered an affiliate.
- 7. I understand that a "person" as defined in Paragraph 287.133(1)(e), Florida Statutes, means any natural person or entity organized under the laws of any state or of the United States with the legal power to enter into a binding contract and which bids or applies to bid on contracts for the provision of goods or services let by a public entity, or which otherwise transacts or applies to transact

business with a public entity. The term "person" includes those officers, who are active, or who have been active, directors, executives, partners, shareholders, employees, members, and agents who are active in management of an entity within the last five (5) years of this sworn statement.

8.	Based on information and belief, the statement which I have marked below is true in relation to the entity submitting this sworn statement. Please check all statements that are applicable.
	Neither the entity submitting this sworn statement, nor any officers, directors, executives partners, shareholders, employees, members, or agents who are active in management of the entity, nor any affiliate of the entity have been charged with and convicted of a public entity crime subsequent to July 1, 1989.
	☐ The entity submitting this sworn statement, or one or more of the officers, directors, executives partners, shareholders, employees, members, or agents who are active in management of the entity, or an affiliate of the entity has been charged with and convicted of a public entity crime subsequent to July 1, 1989, <u>AND</u> (Please indicate which additional statement applies.)
	□ There has been a proceeding concerning the conviction before a hearing officer of the State of Florida, Division of Administrative Hearings. The final order entered by the hearing officer did not place the person or affiliate on the convicted vendor list. (Please attach a copy of the final order.)
	□ The person or affiliate was placed on the convicted vendor list. There has been a subsequen proceeding before a hearing officer of the State of Florida, Division of Administrative Hearings The final order entered by the hearing officer determined that it was in the public interest to remove the person or affiliate from the convicted vendor list. (Please attach a copy of the final order.)
9.	Based on information and belief, the statement that I have marked below is true in relation to the entity submitting this sworn statement. Please check if statement is applicable.
	□ The person or affiliate has not been placed on the convicted vendor list. (If the box is not checked, please describe any action taken by or pending with the Department of General Services.)
10.	The herein sworn statement shall be subject to and incorporate all the terms and conditions contained in Section 287.133 of the Florida Statutes.
11.	Conviction of a public entity crime shall be cause for disqualification.

Peoples Choice Pressure Cleaning, Inc.	RFP No. 08-27-25-11
Proposer's Name	Signature
	Date:08/18/2025
State of: Florida	
County of : Broward	
	before me this 18th day of August,
[18] - 프랑스트스 뉴스 시민에서 전략 [28] - 시민스 사람이 아름다면 하는 그는 아름다면 하는 것 같아 있는 그렇지 않는 것 같아.	who is (who are) personally known to me or who has
produced	as identification and who did (did not) take an oath.
Notary Public Signature	
Notary Name, Printed, Typed of Stamped	AMEIDE M. JACQUES Notary Public - State of Florida Commission = HH 397332
Commission Number: HH 397332	Ary Comm. Expires May 11, 2027 Borced through National Notary Assn.
My Commission Expires: May 12027	

Affidavit of Compliance with Foreign Countries of Concern Pursuant to Section 287.138, Florida Statues (2023)

The undersigned, on behalf of the entity listed below ("Entity"), hereby attests under penalty of perjury as follows:

- 1. Entity is not owned by the government of a foreign country of concern as defined in Section 287.138, Florida Statutes. (Source: § 287.138(2)(a), Florida Statutes.)
- 2. The government of a foreign country of concern does not have a controlling interest in Entity. (Source: § 287.138(2)(b), Florida Statutes.)
- 3. Entity is not organized under the laws of, and does not have a principal place of business in, a foreign country of concern. (Source: § 287.138(2)(c), Florida Statutes.)

	foreign country of concern	. (Source. 9 267.136(2	2)(0), 1 10110	a Glatatos.)
4.	The undersigned is author	ized to execute this af	fidavit on be	ehalf of Entity.
5.	The undersigned further sa	ayeth naught.		
Date: _	08/18	, 2025.	Signed:	J. John
Entity:	Peoples Choice Pressure Clean	ing, Inc.	Name:	Steven Landis
			Title:	President
STATE	OF _ Florida			
COUN	TY OF Broward			
	ation, this 18 day of _	August, 2029 for Peoples Choice F		ven Landis , as ning, Inc. ,
who is	personally known to me or			
	porconally landwin to me or	wno nas produced		as identification.
Notary	Public Signature:			as identificationat Large (Seal)
		<u>f</u>		

Scrutinized Companies and Countries of Concern per Sections 287.135, 215.473, and 287.138, Florida Statutes

Contractor hereby certifies that it: a) has not been placed on the Scrutinized Companies that Boycott Israel List, nor is engaged in a boycott of Israel; b) has not been placed on the Scrutinized Companies with Activities in Sudan List nor the Scrutinized Companies with Activities in the Iran Terrorism Sectors List (formerly the Iran Petroleum Energy Sector List); and c) has not been engaged in business operations in Cuba or Syria. If City determines that Contractor has falsely certified facts under this paragraph, or if Contractor is found to have been placed on a list created pursuant to Section 215.473, Florida Statutes, as amended, or is engaged in a boycott of Israel after the execution of this Agreement, City will have all rights and remedies to terminate this Agreement consistent with Section 287.135, Florida Statutes, as amended. The City reserves all rights to waive certain requirements of this paragraph on a case-by-case exception basis pursuant to Section 287.135, Florida Statutes, as amended. Beginning January 1, 2024, the City must not enter into a contract that grants access to an individual's personal identifying information to any Foreign Country of Concern such as: People's Republic of China, the Russian Federation, the Islamic Republic of Iran, the Democratic People's Republic of Korea, the Republic of Cuba, the Venezuelan regime of Nicolás Maduro, or the Syrian Arab Republic, unless the Contractor provides the City with an affidavit signed by an authorized representative of the Contractor, under penalty of perjury, attesting that the Contractor does not meet any of the criteria in subparagraphs (2)(a)-(c) of Section 287.138, Florida Statutes, as may be amended. Beginning January 1, 2025, the City must not extend or renew any contract that grants access to an individual's personal identifying information unless the Contractor provides the City with an affidavit signed by an authorized representative of the Contractor, under penalty of perjury, attesting that the Contractor does not meet any of the criteria in subparagraphs (2)(a)-(c) of Section 287.138, Florida Statutes, as may be amended. Violations of this Section will result in termination of this Agreement and may result in administrative sanctions and penalties by the Office of the Attorney General of the State of Florida.

susiness in a Foreign Country of Concern, and the a Controlling Interest in the entity. going statement and that the facts stated in it are
going statement and that the facts stated in it are
08/18/2025

Human Trafficking

When an agreement is executed, renewed, or extended between a nongovernmental entity and a governmental entity, the nongovernmental entity must provide the governmental entity with an affidavit signed by an officer or a representative of the nongovernmental entity under penalty of perjury attesting that the nongovernmental entity does not use coercion for labor or services as defined in Section 787.06, Florida Statutes.

Under penalties of perjury, I declare that I have read the it are true.	ne foregoing statement and that the facts stated in
Printed Name: Steven Landis	
Title: President Signature:	

E-Verify Form

Project Name:	Pressure Cleaning Services				
Project No.:	RFP No. 08-27-25-11				

Definitions:

"Contractor" means a person or entity that has entered or is attempting to enter into a contract with a public employer to provide labor, supplies, or services to such employer in exchange for salary, wages, or other remuneration.

"Subcontractor" means a person or entity that provides labor, supplies, or services to or for a contractor or another subcontractor in exchange for salary, wages, or other remuneration.

Effective January 1, 2021, public and private employers, contractors and subcontractors will begin required registration with, and use of the E-verify system in order to verify the work authorization status of all newly hired employees. Vendor/Consultant/Contractor acknowledges and agrees to utilize the U.S. Department of Homeland Security's E-Verify System to verify the employment eligibility of:

- (a) All persons employed by Vendor/Consultant/Contractor to perform employment duties within Florida during the term of the contract; and
- (b) All persons (including subvendors / subconsultants / subcontractors) assigned by Vendor/Consultant/Contractor to perform work pursuant to the contract with the Department. The Vendor/Consultant/Contractor acknowledges and agrees that use of the U.S. Department of Homeland Security's E-Verify System during the term of the contract is a condition of the contract with the City of Coconut Creek; and

Should vendor become successful Contractor awarded for the above-named project, by entering into this Contract, the Contractor becomes obligated to comply with the provisions of Section 448.095, Fla. Stat., "Employment Eligibility," as amended from time to time. This includes but is not limited to utilization of the E-Verify System to verify the work authorization status of all newly hired employees, and requiring all subcontractors to provide an affidavit attesting that the subcontractor does not employ, contract with, or subcontract with, an unauthorized alien. The contractor shall maintain a copy of such affidavit for the duration of the contract. Failure to comply will lead to termination of this Contract, or if a subcontractor knowingly violates the statute, the subcontract must be terminated immediately. Any challenge to termination under this provision must be filed in the Circuit Court no later than 20 calendar days after the date of termination. If this contract is terminated for a violation of the statute by the Contractor, the Contractor may not be awarded a public contract for a period of 1 year after the date of termination.

NO	Company Na	ame: Peoples Choice Pressure Cleaning, Inc.
COMPANY CONTACT INFORMATION	Authorized S	Signature: Itune I profi
	Print Name:	Steven Landis
	Title	President
	Date:	08/25/2025
	Phone:	954-445-8033
	Email:	h2opressure@bellsouth.net
ů	Website:	https://allpeopleschoice.com/



CERTIFICATE OF LIABILITY INSURANCE

12/9/2024

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

this certificate does not confer rights to	inis certificate does not confer rights to the certificate holder in fied of such endorsement(s).					
PRODUCER		CONTACT NAME:	Plymouth Insurance Agency			
Plymouth Insurance Agency		PHONE (A/C, No, Ext	n: 727-682-4040	FAX (A/C, No):	877-491-7980	
2739 US Hwy 19 North		E-MAIL ADDRESS: CERTS@PLYMOUTHINSURANCEAGENCY.COM				
Holiday, FL 34691		INSURER(S) AFFORDING COVERAGE			NAIC#	
		INSURER A :	Kinsale Insurance Company		38920	
INSURED		INSURER B :	Kinsale Insurance Company		38920	
People's Choice Pressu	re Cleaning, Inc	INSURER C :				
4341 SW 73rd Terrace		INSURER D :	:			
Davie, FL 33314		INSURER E :				
		INSURER F :				
COVERAGES CER	TIFICATE NUMBER:		REVISION NUM	/IBER:		

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR		TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	s	
	X	COMMERCIAL GENERAL LIABILITY						EACH OCCURRENCE	\$	1,000,000
		CLAIMS-MADE X OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	100,000
								MED EXP (Any one person)	\$	EXCLUDED
В			Υ		0100332128-0	11/5/2024	11/5/2025	PERSONAL & ADV INJURY	\$	1,000,000
	GEN	I'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	\$	2,000,000
		POLICY X PRO- JECT LOC						PRODUCTS - COMP/OP AGG	\$	2,000,000
		OTHER:							\$	
	AUT	OMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	\$	
		ANY AUTO						BODILY INJURY (Per person)	\$	
		OWNED SCHEDULED AUTOS ONLY						BODILY INJURY (Per accident)	\$	
		HIRED NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	\$	
								,	\$	
		UMBRELLA LIAB X OCCUR						EACH OCCURRENCE	\$	1,000,000
Α	X	EXCESS LIAB CLAIMS-MADE			0100334802-0	11/14/2024	11/5/2025	AGGREGATE	\$	1,000,000
		DED RETENTION \$							\$	
		RKERS COMPENSATION EMPLOYERS' LIABILITY						PER OTH- STATUTE ER		
	ANY	PROPRIETOR/PARTNER/EXECUTIVE TITIE	N/A					E.L. EACH ACCIDENT	\$	
	(Man	CER/MEMBER EXCLUDED?	N/A					E.L. DISEASE - EA EMPLOYEE	\$	
	If yes	s, describe under CRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$	
DES	CRIPT	ION OF OPERATIONS / LOCATIONS / VEHIC	LES (ACORD	101, Additional Remarks Schedule, m	ay be attached if mo	re space is requir	red)		
CEI	RTIF	ICATE HOLDER			CA	NCELLATION				

CERTIFICATE HOLDER	CANCELLATION
	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE
1	gad d. The

		CERTIFICAT	E OF LIAE	BIL:	ITY INS	SURANCE		Date 12/8/2024
Pro	ducer:	Plymouth Insurance Agency 2739 U.S. Highway 19 N. Holiday, FL 34691			rights upon t		of information only and c his Certificate does not a policies below.	
		(727) 938-5562			1	Insurers Affording Cove	erage	NAIC #
Insured: South East Personnel Leasing, Inc. & Subsi 2739 U.S. Highway 19 N.				aries	ies Insurer A: Lion Insurance Company Insurer B:			11075
		Holiday, FL 34691			Insurer C:			
		, i.e., adj, i.e.			Insurer D:			
Carr					Insurer E:			
The po	spect to w	surance listed below have been issued to the insured hich this certificate may be issued or may pertain, the have been reduced by paid claims.						
INSR LTR	ADDL INSRD	Type of Insurance	Policy Number		cy Effective Date M/DD/YY)	Policy Expiration Date (MM/DD/YY)	Limi	ts
		GENERAL LIABILITY			,	,	Each Occurrence	\$
		Commercial General Liability Claims Made Occur					Damage to rented premises (EA occurrence)	\$
		H					Med Exp	\$
			1				Personal Adv Injury	\$
		General aggregate limit applies per: Policy Project LOC					General Aggregate	\$
		Tolley Troject					Products - Comp/Op Agg	\$
		AUTOMOBILE LIABILITY Any Auto					Combined Single Limit (EA Accident)	\$
		All Owned Autos Scheduled Autos					Bodily Injury (Per Person)	\$
		Hired Autos Non-Owned Autos					Bodily Injury (Per Accident)	\$
		Non-owned Autos					Property Damage (Per Accident)	\$
		EXCESS/UMBRELLA LIABILITY					Each Occurrence	
		Occur Claims Made Deductible					Aggregate	
Α		rs Compensation and yers' Liability	WC 71949	01	/01/2025	01/01/2026	X WC Statu- tory Limits OTH ER	
	Any pro	prietor/partner/executive officer/member d? NO					E.L. Each Accident	\$1,000,000
		lescribe under special provisions below.					E.L. Disease - Ea Employee	
	, .						E.L. Disease - Policy Limits	\$1,000,000
		s of Operations/Locations/Vehicles/Ex	clusions added	by En	dorsement/S _l	pecial Provisions:	client ID: 90-	
		applies to active employee(s) of South East Pe	People's Ch	oice Pr	essure Cleanin	g, Inc.		
	-	applies to injuries incurred by South East Pers not apply to statutory employee(s) or indeper	=-				n: FL.	
A list o	_	ive employee(s) leased to the Client Company				•	ompany.com	
, !								
055	TIEIO	HOLDER		•	NOELL ATION		Begin D	Pate: 7/20/2020
CER	IFICATE	HOLDER		Sho insu	rer will endeavor to	mail 30 days written notice to	lled before the expiration date the the certificate holder named to the	e left, but failure to
				do s		obligation or liability of any kin	d upon the insurer, its agents or r	epresentatives.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 06/02/2025

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						ficate holder in lieu of su				Toquite an enuorsemen		iaiement on
PRODUCER					CONTACT Alan Edwards							
StateFarm Alan Edwards						PHONE (A/C, No	o, Ext): 954-43	4-8255	FAX (A/C, No):			
4705 SW 148 Avenue S			Suite 1	103		E-MAIL ADDRE	alam adu.		tatefarm.com			
	9								URER(S) AFFOR	DING COVERAGE		NAIC#
Davie			FL 333302129			INSURE	RA: State Fa	rm Mutual Aut	omobile Insurance Compan	y	25178	
INSUI	RED						INSURE	RB:				
	PE	EOPLES CHO	DICE PRESSU	JRE (CLEA	NING INC	INSURE	RC:				
	43	41 SW 73RE) TER				INSURER D:					
								INSURER E :				
	DA	AVIE		FL 333143030				RF:				
	/ERAGES					NUMBER:				REVISION NUMBER:		
IN CE	DICATED. N ERTIFICATE N	OTWITHSTAN MAY BE ISSU	NDING ANY RE JED OR MAY	EQUIF PERT	REME AIN,	RANCE LISTED BELOW HA NT, TERM OR CONDITION THE INSURANCE AFFORD LIMITS SHOWN MAY HAVE	OF AN	Y CONTRACT	OR OTHER S DESCRIBE	DOCUMENT WITH RESPE D HEREIN IS SUBJECT TO	ст то	WHICH THIS
INSR LTR		PE OF INSURAL			SUB WVD	POLICY NUMBER		POLICY EFF POLICY EXP (MM/DD/YYYY) LIMITS			 S	
		CIAL GENERAL						((MARIO DITTIT)	EACH OCCURRENCE	\$	
	CLAI	IMS-MADE	OCCUR							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	
										MED EXP (Any one person)	\$	
										PERSONAL & ADV INJURY	\$	
	GEN'L AGGRE	GATE LIMIT APF	PLIES PER:							GENERAL AGGREGATE	\$	
	POLICY	PRO- JECT	LOC							PRODUCTS - COMP/OP AGG	\$	
	OTHER:	<u></u> _									\$	
	AUTOMOBILE LIABILITY				G56 4462-B19-59L		02/19/2025	08/19/2025	COMBINED SINGLE LIMIT (Ea accident)	\$		
	ANY AUTO					P71 4144-E25-59				BODILY INJURY (Per person)	son) \$ 1,000,000	
Α	OWNED AUTOS O HIRED	NLY X	CHEDULED UTOS	Υ	Υ			05/25/2025	11/25/2025	BODILY INJURY (Per accident)	\$ 1,00	0,000
	HIRED AUTOS O	NLY NLY A	ION-OWNED UTOS ONLY			J50 9646-A19-59L		01/19/2025	07/19/2025	PROPERTY DAMAGE (Per accident)	\$ 1,00	0,000
											\$	
	UMBRELL	LA LIAB	OCCUR							EACH OCCURRENCE	\$	
EXCESS LIAB CLAIMS-MADE								AGGREGATE	\$			
DED RETENTION \$									DED OTT	\$		
WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?									PER OTH- STATUTE ER	\$		
			N/A						E.L. EACH ACCIDENT	\$		
(Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below								E.L. DISEASE - EA EMPLOYEE	\$			
								E.L. DISEASE - POLICY LIMIT	\$			
	DIDTION OF T		04TIONS *****		00=	.404 4 1199 1				<u> </u>		
DESC	RIPTION OF OP	PERATIONS / LO	CATIONS / VEHIC	LES (A	CORE	101, Additional Remarks Schedu	ile, may b	e attached if mo	re space is requii	red)		
CET	TIEICATE I	HOI DEB					CANC	ELLATION				
CERTIFICATE HOLDER CA							CANC	CLLA HUN				
							SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.					
							AUTHORIZED REPRESENTATIVE					
							Mr. B. Edward					
							This form was system-generated on 06/02/2025 .					

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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 06/02/2025

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						ificate holder in lieu of su					A 3 	Laternetit UII
PRODUCER					CONTA NAME:	CT Alan Edv	vards					
StateFarm Alan Edwards						PHONE (A/C, No	o, Ext): 954-43	34-8255	FAX (A/C, No):			
4705 SW 148 Avenue S			Suite 1	103		E-MAIL ADDRE	alam adu.		tatefarm.com			
4	→ ®								URER(S) AFFOR	RDING COVERAGE		NAIC#
		Davie		FL 333302129			INSURE	RA: State Fa	rm Mutual Aut	omobile Insurance Compan	у	25178
INSUF	RED						INSURE	RB:				
	PE	EOPLES CH	OICE PRESSI	JRE (CLEA	ANING INC	INSURE	R C :				
	43	341 SW 73RI) TER				INSURER D :					
							INSURER E:					
DAVIE			FL 333143030				RF:					
	ERAGES					NUMBER:				REVISION NUMBER:		
INI CE	DICATED. N RTIFICATE I	IOTWITHSTAI MAY BE ISSI	NDING ANY RE UED OR MAY	EQUIF PERT POLIC	REME AIN, CIES.	RANCE LISTED BELOW HA INT, TERM OR CONDITION THE INSURANCE AFFORD LIMITS SHOWN MAY HAVE	OF ANDED BY	Y CONTRACT THE POLICIE REDUCED BY	OR OTHER S DESCRIBE PAID CLAIMS	DOCUMENT WITH RESPE D HEREIN IS SUBJECT T	CT TO	WHICH THIS
INSR LTR	TY	YPE OF INSURA	NCE	ADD INSD	SUB WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	s	
	COMMER	CIAL GENERAL	LIABILITY							EACH OCCURRENCE	\$	
Ī	CLA	IMS-MADE	OCCUR							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	
										MED EXP (Any one person)	\$	
										PERSONAL & ADV INJURY	\$	
	GEN'L AGGRE	GATE LIMIT APP	PLIES PER:							GENERAL AGGREGATE	\$	
	POLICY	PRO- JECT	LOC							PRODUCTS - COMP/OP AGG	\$	
	OTHER:									COMPINED CINIOLE LIMIT	\$	
AUTOMOBILE LIABILITY					J24 7484-B27-59E		02/27/2025	08/27/2025	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,00	0,000	
		ANY AUTO OWNED SCHEDULED AUTOS ONLY HIRED NON-OWNED			Y			02/21/2020	00/21/2020	BODILY INJURY (Per person)	\$	
Α	AUTOS O									BODILY INJURY (Per accident) PROPERTY DAMAGE	\$	
	X AUTOS O		AUTOS ONLY							(Per accident)	\$	
											\$	
-	UMBRELI		OCCUR							EACH OCCURRENCE	\$	
EXCESS LIAB CLAIMS-MADE								AGGREGATE	\$			
DED RETENTION \$ WORKERS COMPENSATION									PER OTH-	\$		
AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?									STATUTE ER	\$		
			N/A						E.L. EACH ACCIDENT	\$		
(Mandatory in NH) If yes, describe under								E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT	<u> </u>			
	DESCRIPTION	OF OPERATION	NS below							E.L. DISEASE - POLICY LIMIT	\$	
DESC	RIPTION OF OF	PERATIONS / LO	CATIONS / VEHIC	LES (4	CORE	 D 101, Additional Remarks Schedu	ule, mav h	e attached if mo	re space is requir	red)		
				. (, , .			•		
CERTIFICATE HOLDER							CANCELLATION					
							SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.					
	-						AUTHORIZED REPRESENTATIVE					
							Alla B February					
										This form was system-ge	nerated or	n 06/02/2025 .

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BROWARD COUNTY LOCAL BUSINESS TAX RECEIPT

115 S. Andrews Ave., Rm. A-100, Ft. Lauderdale, FL 33301-1895 - 954-357-4829 VALID OCTOBER 1, 2024 THROUGH SEPTEMBER 30, 2025

Receipt #: 325-17029 CLEANING/JANITORIAL (PRESSURE Business Type: CLEANIING) Business Name: PEOPLE'S CHOICE PRESSURE CLEANING

TNC

Owner Name: STEVE LANDIS Business Opened:07/14/2005

Business Location: 4341 SW 73 TERRACE

DAVIE

State/County/Cert/Reg: **Exemption Code:**

Business Phone: 954-445-8033

Rooms Seats **Employees** Machines **Professionals**

6

For Vending Business Only **Number of Machines:** Vending Type: NSF Fee Total Paid Transfer Fee Prior Years Tax Amount Penalty Collection Cost 81.00 0.00 0.00 81.00 0.00 0.00 0.00

81.00 Receipt Fee 0.00 Packing/Processing/Canning Employees

THIS RECEIPT MUST BE POSTED CONSPICUOUSLY IN YOUR PLACE OF BUSINESS

THIS BECOMES A TAX RECEIPT

WHEN VALIDATED

This tax is levied for the privilege of doing business within Broward County and is non-regulatory in nature. You must meet all County and/or Municipality planning and zoning requirements. This Business Tax Receipt must be transferred when the business is sold, business name has changed or you have moved the business location. This receipt does not indicate that the business is legal or that it is in compliance with State or local laws and regulations.

Mailing Address:

STEVE LANDIS 4341 SW 73 TERR DAVIE, FL 33314 Receipt #WWW-23-00279306 Paid 08/09/2024 81.00

2024 - 2025

BROWARD COUNTY LOCAL BUSINESS TAX RECEIPT

115 S. Andrews Ave., Rm. A-100, Ft. Lauderdale, FL 33301-1895 – 954-357-4829 VALID OCTOBER 1, 2024 THROUGH SEPTEMBER 30, 2025

Receipt #: 325-17029

Business Type: CLEANING/JANITORIAL (PRESSURE CLEANING) Business Name: PEOPLE'S CHOICE PRESSURE CLEANING

INC

Owner Name: STEVE LANDIS **Business Opened:** 07/14/2005

Business Location: 4341 SW 73 TERRACE State/County/Cert/Reg:

DAVIE **Exemption Code:**

Business Phone: 954-445-8033

Machines Professionals Rooms Seats **Employees** 6

Signature		For Vending Business Only							
		Number of Mac	hines:						
	Tax Amount	Transfer Fee	Transfer Fee NSF Fee		Prior Years	Collection Cost	Total Paid		
	81.00	0.00	0.00	0.00	0.00	0.00	81.00		

Receipt #WWW-23-00279306 Paid 08/09/2024 81.00

CERTIFICATE OF COMPLETION

GREGORY TERWILLIGER

Has Completed a FDOT Approved Temporary Traffic Control (TTC): Advanced Course

Training Provider:

Metro Florida Safety Council

Dade, Broward, Palm Beach FL 33441 Tri-County

Phone: 954-603-1900

Verify this Certificate by visiting www.motadmin.com

629921

Certificate No. Instructor

 $\sum_{i=1}^{\infty}$

Expiration Date

09/06/2028

09/10/2024 Issue Date

State of Florida Department of State

I certify from the records of this office that PEOPLE'S CHOICE PRESSURE CLEANING, INC. is a corporation organized under the laws of the State of Florida, filed on November 8, 1999.

The document number of this corporation is P99000098701.

I further certify that said corporation has paid all fees due this office through December 31, 2025, that its most recent annual report/uniform business report was filed on January 31, 2025, and that its status is active.

I further certify that said corporation has not filed Articles of Dissolution.

Given under my hand and the Great Seal of the State of Florida at Tallahassee, the Capital, this the Twenty-seventh day of February, 2025



Secretary of State

Tracking Number: 6898051312CU

To authenticate this certificate, visit the following site, enter this number, and then follow the instructions displayed.

https://services.sunbiz.org/Filings/CertificateOfStatus/CertificateAuthentication



Department of State / Division of Corporations / Search Records / Search by Entity Name /

Detail by Entity Name

Florida Profit Corporation
PEOPLE'S CHOICE PRESSURE CLEANING, INC.

Filing Information

 Document Number
 P99000098701

 FEI/EIN Number
 65-0959200

 Date Filed
 11/08/1999

State FL

Status ACTIVE

Principal Address

4341 SW 73 TERRACE DAVIE, FL 33314

Changed: 03/05/2002

Mailing Address

4341 SW 73 TERRACE DAVIE, FL 33314

Changed: 01/22/2008

Registered Agent Name & Address

LANDIS, STEVE 4341 SW 73 TERRACE DAVIE, FL 33314

Address Changed: 03/05/2002

Officer/Director Detail

Name & Address

Title P

LANDIS, STEVE 4341 SW 73 TERRACE DAVIE, FL 33314

Annual Reports

Report Year Filed Date 2023 01/23/2023

2024	02/03/2024
2025	01/31/2025

Document Images

01/31/2025 ANNUAL REPORT	View image in PDF format
02/03/2024 ANNUAL REPORT	View image in PDF format
01/23/2023 ANNUAL REPORT	View image in PDF format
01/25/2022 ANNUAL REPORT	View image in PDF format
01/25/2021 ANNUAL REPORT	View image in PDF format
03/31/2020 ANNUAL REPORT	View image in PDF format
02/15/2019 ANNUAL REPORT	View image in PDF format
02/12/2018 ANNUAL REPORT	View image in PDF format
01/12/2017 ANNUAL REPORT	View image in PDF format
01/28/2016 ANNUAL REPORT	View image in PDF format
02/19/2015 ANNUAL REPORT	View image in PDF format
03/11/2014 ANNUAL REPORT	View image in PDF format
03/20/2013 ANNUAL REPORT	View image in PDF format
03/23/2012 ANNUAL REPORT	View image in PDF format
04/06/2011 ANNUAL REPORT	View image in PDF format
02/19/2010 ANNUAL REPORT	View image in PDF format
04/28/2009 ANNUAL REPORT	View image in PDF format
01/22/2008 ANNUAL REPORT	View image in PDF format
01/08/2007 ANNUAL REPORT	View image in PDF format
01/06/2006 ANNUAL REPORT	View image in PDF format
01/31/2005 ANNUAL REPORT	View image in PDF format
02/05/2004 ANNUAL REPORT	View image in PDF format
01/08/2003 ANNUAL REPORT	View image in PDF format
03/05/2002 ANNUAL REPORT	View image in PDF format
02/05/2001 ANNUAL REPORT	View image in PDF format
05/31/2000 ANNUAL REPORT	View image in PDF format
11/08/1999 Domestic Profit	View image in PDF format

2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000098701

Entity Name: PEOPLE'S CHOICE PRESSURE CLEANING, INC.

FILED
Jan 31, 2025
Secretary of State
5620052525CC

Current Principal Place of Business:

4341 SW 73 TERRACE DAVIE, FL 33314

Current Mailing Address:

4341 SW 73 TERRACE DAVIE, FL 33314 US

FEI Number: 65-0959200 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

LANDIS, STEVE 4341 SW 73 TERRACE DAVIE, FL 33314 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 LANDIS, STEVE

Address 4341 SW 73 TERRACE

City-State-Zip: DAVIE FL 33314

SIGNATURE: STEVE LANDIS

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.

PRESIDENT