2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000014113 1. Entity Name JC HOUSECLEANING CORPORATION



Principal Place of Business

Mailing Address

5028 MILLENIA BLVD.

5028 MILLENIA BLVD.

ORLANDO, FL 32839 ORLANDO, FL 32839

FILED Sep 09, 2005 8:00 am Secretary of State

09-09-2005 90028 041 ***550.00

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CR2E034 (10/03)



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

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4. FEI Number Applied For 04-3599292 Not Applicable \$8.75 Additional

5. Certificate of Status Desired

07052005

Fee Required

<u>407-264-5461</u>

VIEIRA, CLAUDIA B 5028 MILLENIA BLVD. ORLANDO, FL 32839

SIGNATURE: _

DO NOT WRITE IN THIS SPACE

No Chg-P

8. The above the obligation	named entity submits this statement for the pions of registered agent.	purpose of changing its registe	red office or re	egistered agent, or bo	th, in the State of Florida. I am familiar with, and accept	
SIGNATURE_	Signature, typed or printed name of registered agent and title	d applicable. (NOTE: Beniste	red Anent sinnature	required when reinstating)	DATE	
		, , , , , , , , , , , , , , , , , , ,		- reduced when to have any		
FILE NOW!!! FEE IS \$550.00 Due by September 7, 2005 Trust Fund Contribution.		~ —	\$5.00 May Be Added to Fees			
10.	OFFICERS AND DIREC	CTORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP (15%) VIEIRA, CLAUDIA B 5028 MILLENIA BLVD . ORLANDO, FL 32839					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST VIEIRA, JOAO JR. 5028 MILLENIA BLVD . ORLANDO, FL 32839					
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		'		IN '	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP					••• •	
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 epoort 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 advisers, with the properties of the empowered.						

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR