2007 FOR PROFIT CORPORATION ANNUAL REPORT

changed, or on an atta

SIGNATURE:

with an address, with all other like empowered.

PED OR PRINTED NAME OF BIGNING OFFICER OR DIRECT

Sep 10, 2007 8:00 am Secretary of State DOCUMENT # P02000133199 09-10-2007 90005 029 ***150 00 LYSORA CLEANING, INC. Principal Place of Business Mailing Address 1565 NW 28 ST 1565 NW 28 ST MIAMI, FL 33142 MIAMI, FL 33142 07122007 No Chg-P * CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 16-1649014 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SANABRIA, RAUL L DO NOT WRITE 1565 NW 28 ST MIAMI, FL 33142 IN THIS SPACE 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE_ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the Due by September 14, 2007 Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. 10. OFFICERS AND DIRECTORS TITLE SANABRIA, RAUL L NAME STREET ADDRESS 11201 SW 55 ST BOX: 33 CITY-ST-ZIP MIRAMAR, FL 33025 DV SANABRIA, SORAYA A NAME 11201 SW 55 ST BOX: 33 STREET ADDRESS CITY-ST-ZIP MIRAMAR, FL 33025 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report of 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 10 or Block 11 if

FILED