


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 23, 2005 8:00 am
Secretary of State

04-20-2005 90320 026 ***150.00

DOCUMENT # P03000019645
1. Entity Name
ARSA & ASSOCIATES CLEANING COMPANY



Principal Place of Business
4961 NW 11TH PLACE
LAUDERHILL, FL 33313

Mailing Address
P.O. BOX 8331
FORT LAUDERDALE, FL 33310

66018343



04132005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
75-3103853

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
SURIEL, ANDRES
4961 NW 11TH PLACE
LAUDERHILL, FL 33313

DO NOT WRITE 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: *Andres Suriel* *Andres Suriel* 4/14/05
Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent signature required when relinquishing) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	SURIEL, ANDRES
STREET ADDRESS	4961 NW 11TH PLACE
CITY - ST - ZIP	LAUDERHILL, FL 33313
TITLE	V
NAME	SURIEL, YELIN
STREET ADDRESS	4961 NW 11TH PLACE
CITY - ST - ZIP	LAUDERHILL, FL 33313
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

DO NOT WRITE IN THIS SPACE

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 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Andres Suriel* 5/16/05 454 3099159
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #