

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000159689

FILED
Jan 22, 2007
Secretary of State

Entity Name: LUXURY GLENN CLEANING SERVICES INC.

Current Principal Place of Business:

1450 MISTY PINES CIR
202
NAPLES, FL 34105

New Principal Place of Business:

Current Mailing Address:

1450 MISTY PINES CIR
202
NAPLES, FL 34105

New Mailing Address:

FEI Number: 25-1905766

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ORTIZ, ELIZABETH
1450 MISTY PINES CIR
202
NAPLES, FL 34105 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ORTIZ, ELIZABETH
Address: 1450 MISTY PINES CIR APT 202
City-St-Zip: NAPLES, FL 34105

Title: TRES () Delete
Name: PATINO, LUIS J
Address: 1450 MISTY PINES CIR APT 202
City-St-Zip: NAPLES, FL 34105

Title: VP () Delete
Name: PATINO, LUIS G
Address: 1450 MISTY PINES CIR APT 202
City-St-Zip: NAPLES, FL 34105

Title: SEC (X) Delete
Name: PATINO, NATALIE
Address: 1450 MISTY PINES CIR APT 202
City-St-Zip: NAPLES, FL 34105

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: LUIS GABRIEL PATINO

VP

01/22/2007

Electronic Signature of Signing Officer or Director

Date