

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000003277

FILED
Apr 30, 2006
Secretary of State

Entity Name: PRO-CLEAN JANITORIAL SYSTEM, INC.

Current Principal Place of Business:

4411 BEE RIDGE ROAD
SUITE 401
SARASOTA, FL 34233

New Principal Place of Business:

Current Mailing Address:

4411 BEE RIDGE ROAD
SUITE 401
SARASOTA, FL 34233

New Mailing Address:

FEI Number: 65-0431080 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAY, LINCOLN S
7327 PALOMINO TRAIL
SARASOTA, FL 34241 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: P () Delete
Name: HAY, LINCOLN S
Address: 7327 PALOMINO TRAIL
City-St-Zip: SARASOTA, FL

Title: VPT () Delete
Name: HAY, YVONNE C
Address: 7327 PALOMINO TRAIL
City-St-Zip: SARASOTA, FL

Title: VP () Delete
Name: OLLAR, SCOTT
Address: 7327 PALOMINO TRAIL
City-St-Zip: SARASOTA, FL 34241

Title: S () Delete
Name: OLLAR, CECILE
Address: 7327 PALOMINO TRAIL
City-St-Zip: SARASOTA, FL 34241

Title: AVP () Delete
Name: HAY, JR., LINCOLN S
Address: 1792 BAYON DR.
City-St-Zip: VENICE, FL 34292

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HAY, LINCOLN S
Address: 7327 PALOMINO TRAIL
City-St-Zip: SARASOTA, FL 34241

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

Title: VP (X) Change () Addition
Name: OLLAR, SCOTT
Address: 2309 CADILLAC STREET
City-St-Zip: SARASOTA, FL 34231

Title: S (X) Change () Addition
Name: OLLAR, CECILE
Address: 2309 CADILLAC STREET
City-St-Zip: SARASOTA, FL 34231

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: LINCOLN S HAY

Electronic Signature of Signing Officer or Director

P

04/30/2006

_____ Date