

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000003522

FILED  
Jun 30, 2005  
Secretary of State

Entity Name: A+ CLEANING OF TAMPA BAY, INC.

**Current Principal Place of Business:**

5036 CYPRESS TERRACE DRIVE  
TAMPA, FL 33624

**New Principal Place of Business:**

**Current Mailing Address:**

5036 CYPRESS TERRACE DRIVE  
TAMPA, FL 33624

**New Mailing Address:**

FEI Number: 59-3289005

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

PUGH, JACQUELINE  
7616 LIMBUAY CT  
TAMPA, FL 33625 US

**Name and Address of New Registered Agent:**

PUGH, JACQUELINE  
5036 CYPRESS TRACE DRIVE  
TAMPA, FL 33624 US

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

06/30/2005

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: PUGH, JACQUELINE  
Address: 7616 LIMBUAY CT  
City-St-Zip: TAMPA, FL

Title: O ( ) Delete  
Name: PUGH, WILLIAM F  
Address: 7616 LIMBUAY CT  
City-St-Zip: TAMPA, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: PUGH, JACQUELINE  
Address: 5036 CYPRESS TRACE DRIVE  
City-St-Zip: TAMPA, FL 33624

Title: O (X) Change ( ) Addition  
Name: PUGH, WILLIAM F  
Address: 5036 CYPRESS TRACE DRIVE  
City-St-Zip: TAMPA, FL 33624

I hereby certify that the information supplied with this filing does not qualify for the 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 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: WILLIAM PUGH

Electronic Signature of Signing Officer or Director

PRES

06/30/2005

Date