2008 FOR PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE:

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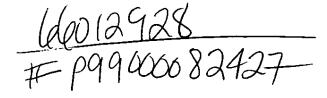
Secretary of State DOCUMENT # P99000082427 04-17-2008 90037 002 ***150.00 O.B. CLEANING SERVICE INCORPORATED Principal Place of Business Mailing Address 15009 NAPLES PLACE 15009 NAPLES PLACE TAMPA, FL 33624 TAMPA, FL 33624 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #. etc. 04132008 CR2E034 (12/06) City & State City & State 4. FEI Number Applied For 59-3603337 Not Applicable Ζiρ Country Country \$8.75 Additional 5. Certificate of Status Desired_ __ 🖸 ___ Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent PHILLIPS, FRANCES S 15009 NAPLES PLACE TAMPA, FL 33624 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 SIGNATURE Frances S. Phillos (P) April 14, 2008 DATE 9. Election Campaign Financing FILE NOWIII FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 Delate TITLE TITLE Addition ☐ Change BAKER, SCOTT NAME STREET ADDRESS 5856 DARTMOUTH AVE, N STREET ADDRESS SAINT PETERSBURG, FL 33710 CITY-ST-72 CITY-ST-ZIP Delete TITLE Addition PHILLS, FRANCES S NAME NAME i Hos : STREET ADDRESS 15009 NAPLES PLACE STREET ADDRESS TAMPA, FL 33824 -CITY-ST-ZIP CITY-57-20P TITLE ☐ Defete MILĖ ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-SI-7/P CITY-SI-ZIP TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZP CITY-ST-ZIP MILE Delete tme ☐ Addition ☐ Change HALLE MALUF STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or suppliemental report is true and acceptate and that my signature shall have the same legal effect as if made under ceth; that I am an officer or director of the corporation or the receiver or trustee empowered to effect this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if Apr. (14,2008 (813

FILED

Jun 02, 2008 8:00 am

ATTACHMENT

Division of Corporations P.O. Box 1500 Tallahassee, FL 32302-1500



Dear Annual Reports Section,

Enclose is the return copy that is now complete after my conversation with Barbara on May 29, 2008. I am addressing the information again on this letter for the ledge able changes from number 11.

Title P Phillos, Frances S. 15009 Naples Place Tampa, FL 33624

Thank you,

Frances Phillos