

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P18000075914

Entity Name: ABP IDEAL CLEANING SOLUTIONS SERVICES INC**Current Principal Place of Business:**113 PINE TREE DR
ORMOND BEACH, FL 32174**Current Mailing Address:**PO BOX 751833
ORMOND BEACH, FL 32173**FEI Number:** APPLIED FOR**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**FOCUS 9 ENTERPRISES LLC
2728 ENTERPRISE RD
STE 200
ORANGE CITY, FL 32763 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_____
Date**Officer/Director Detail :**

Title	P
Name	ASHLEY, ERIC SR
Address	113 PINE TREE DR
City-State-Zip:	ORMOND BEACH FL 32174

Title	VP
Name	ASHLEY, CATHY
Address	113 PINE TREE DR
City-State-Zip:	ORMOND BEACH FL 32174

Title	MGRM
Name	BROWN, SHANTRELL
Address	940 15TH STREET APT 101
City-State-Zip:	HOLLY HILL FL 32117

Title	AMBR
Name	PATTERSON, KEON
Address	723 MERCEDES ST
City-State-Zip:	DAYTONA BEACH FL 32117

Title	AMBR
Name	ASHLEY, ERIC JR
Address	8 KALENDAR CT
City-State-Zip:	PALM COAST FL 32164

I hereby 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 all other like empowered.

SIGNATURE: ERIC ASHLEY SR**PRESIDENT****06/18/2019**_____
Electronic Signature of Signing Officer/Director Detail_____
Date