	ling Address:			
1611 ROBBI				
NOKOMIS,	FL 34275 US			
FEI Number: 84-2553918			Certificate of Status Desired: No	
Name and Address of Current Registered Agent:			Certificate of Status De	Siled. NO
	duress of Current Registered Agent.			
LICATA, SAL 1611 ROBBINS	RD.			
NOKOMIS, FL	34275 US			
The above name	I entity submits this statement for the purpose of changing its regi	istorad offica ar ragis	torod agant, or both in the State of F	Florida
		stered onice of regis	lered agent, or both, in the State of T	
SIGNATURE	E SAL LICATA			02/12/2024
	Electronic Signature of Registered Agent			Date
Officer/Dire	Electronic Signature of Registered Agent			
	Electronic Signature of Registered Agent	Title	VP	
Officer/Dire	Electronic Signature of Registered Agent	Title Name	VP LICATA, DEBRA	
Officer/Dire	Electronic Signature of Registered Agent ctor Detail : P			
Officer/Dire Title Name	Electronic Signature of Registered Agent ctor Detail : P LICATA, SALVATORE 1611 ROBBINS RD.	Name	LICATA, DEBRA 1611 ROBBINS RD.	
Officer/Dire Title Name Address City-State-Zip:	Electronic Signature of Registered Agent Ctor Detail : P LICATA, SALVATORE 1611 ROBBINS RD. NOKOMIS FL 34275	Name Address	LICATA, DEBRA 1611 ROBBINS RD.	
Officer/Dire Title Name Address City-State-Zip: Title	Electronic Signature of Registered Agent Ctor Detail : P LICATA, SALVATORE 1611 ROBBINS RD. NOKOMIS FL 34275 SEC	Name Address	LICATA, DEBRA 1611 ROBBINS RD.	
Officer/Dire Title Name Address City-State-Zip:	Electronic Signature of Registered Agent Ctor Detail : P LICATA, SALVATORE 1611 ROBBINS RD. NOKOMIS FL 34275	Name Address	LICATA, DEBRA 1611 ROBBINS RD.	
Officer/Dire Title Name Address City-State-Zip: Title	Electronic Signature of Registered Agent Ctor Detail : P LICATA, SALVATORE 1611 ROBBINS RD. NOKOMIS FL 34275 SEC	Name Address	LICATA, DEBRA 1611 ROBBINS RD.	

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.

PRESIDENT

SIGNATURE: SALVATORE LICATA

Electronic Signature of Signing Officer/Director Detail

2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P19000056809

Entity Name: DEBS ELITE CLEANING SERVICE INC.

Current Principal Place of Business:

1611 ROBBINS RD. NOKOMIS, FL 34275

Current Mailing Address

FILED

Feb 12, 2024 **Secretary of State** 6983263370CC

02/12/2024

Date