


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 10, 2007 08:00 AM
Secretary of State

DOCUMENT # K32432	
1. Entity Name ROPER'S BUILDING MAINTENANCE AND JANITORIAL SERVICE, INC.	

Principal Place of Business % VALENTIN C. RODRIGUEZ 1812 LAUREL LANE LAKE CLARKE SHORES, FL 33406-6744	Mailing Address % VALENTIN C. RODRIGUEZ 1812 LAUREL LANE LAKE CLARKE SHORES, FL 33406-6744
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01082007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0039566	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent PEREZ, ENA R. 1812 LAUREL LANE LAKE CLARKE SHORES, FL 33406

**DO NOT WRITE
IN THIS SPACE**

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 the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP PEREZ, ENA R 1812 LAUREL LANE LK CLARKE SHORES, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD RODRIGUEZ, IRIS M. 1923 LAUREL LANE LAKE CLARKE SHORES, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S RODRIGUEZ, JORGE P 1923 LAUREL LANE LAKE CLARKE SHORES, FL 33406
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T RODRIGUEZ, GEORGE L 1201 WILLOW RD WEST PALM BEACH, FL 33406
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000580497
01/10/07-80051-004 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Jorge Rodriguez 1/10/07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #