2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Jan 31, 2007 08:00 AM DOCUMENT # K33846 **Secretary of State** 1. Entity Namo BOCA GRANDE CLEANING, INC. Principal Place of Business Mailing Address 446 FOURTH ST 446 FOURTH ST P O BOX 664 BOCA GRANDE FL 33921 P O BOX 664 BOCA GRANDE FL 33921 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suito, Apt. #, etc. 1st MOORE CR2E034 (10/06) City & State City & State 4. FEI Number Applied For 65-0095864 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Namo TRAUTMAN, BILLIE JO Street Address (P.O. Box Number is Not Acceptable) 10477 WASHINGTON ROAD PORT CHARLOTTE FL 33981 City Zip Code 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 (NOTE; Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 **\$5.00** May Be 9. Election Campaign Financing After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State, OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. Addition Change THE Delete TITLE TRAUTMAN, BILLIE JO NAME NAME 10477 WASHINGTON RD STREET ADORESS STREET ADDRESS U000000613010 PORT CHARLOTTE FL CITY-ST-ZIP CITY-ST-ZIP 02/05/07-80021-018 150.00 ☐ Change HIVE Defete TOTAL Addition TRAUTMAN, EDWARD 10477 WASHINGTON RD STREET ADDRESS STREET ADDRESS PORT CHARLOTTE FL CITY-ST-7/P CITY-SI-7IP Change Addition TITLE Delete IIIIE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete ☐ Change NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - 7IP HILE □ Change Addition HILE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-SI-ZIP CITY-ST-ZIP

12. I heroby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 offect as if made under eath, 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: Edward Trautman Edward Trautman 1-29-07
BIGNATURE SIGNATURE AND TYPED OR PRINTED NAME OF BIGNING OFFICER OR DIRECTOR

FILED