

**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**May 03, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # K85636</b>		
1. Entity Name <b>LITTLE RIVER JANITORIAL SERVICES CORPORATION</b>		
Principal Place of Business <b>% THOMAS TANKS 9310 N W LITTLE RIVER DR MIAMI, FL 33147</b>		Mailing Address <b>% THOMAS TANKS 9310 N W LITTLE RIVER DR MIAMI, FL 33147</b>
<b>DO NOT WRITE IN THIS SPACE</b>		
6. Name and Address of Current Registered Agent  <b>TANKS, THOMAS 9310 N W LITTLE RIVER DR MIAMI, FL 33147</b>		04292004 No Chg-P CR2E034 (10/03)
		4. FEI Number <b>65-0112096</b>
		Applied For <input type="checkbox"/> Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>
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.		<b>DO NOT WRITE IN THIS SPACE</b>
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small> DATE _____		
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PT TANKS, THOMAS 9310 N W LITTLE RIVER DR MIAMI FL	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD TANKS, MARTHA 9310 N W LITTLE RIVER DR MIAMI FL	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: <i>Thomas Tanks</i>		04-29-04 305-836-6332
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #