## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## **DOCUMENT # K85636**

1. Entity Name

LITTLE RIVER JANITORIAL SERVICES CORPORATION



FILED Mar 15, 2007 08:00 AM Secretary of State

Principal Place of Business

MIAMI, FL 33147

% THOMAS TANKS 9310 N W LITTLE RIVER DR Mailing Address

% THOMAS TANKS 9310 N W LITTLE RIVER OR MIAMI, FL 33147



03072007 No

No Chg-P

CR2E034 (11/05)

65-0112096	4.
00-0112090	

Applied For Not Applicable

305-836-6332

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

TANKS, THOMAS 9310 N W LITTLE RIVER DR MIAMI, FL 33147

## 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 agont and little if applicable (NOTE: Registered Agont signature required when remistaling)  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 DIRECT	TORS						
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,				000000667411 03/26/07-80027-012	? 150.0		
TITLE NAME STREET AODRESS CITY-SI-ZIP			•	DO	NOT WRITE			
TITLE NAME STREET ADDRESS . CITY-ST-ZIP				in 1	THIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP								
NAME STREET ADDRESS CITY-ST-ZIP						:		
12. Thereby certify that the information supplied with this filling 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 I changed, or on an attachment with an address, with all other like empowered.								