## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT (48)

## FILED Jun 02, 2005 8:00 am Secretary of State

1. Entity Nam						<b>\</b>	05-03-2005	•	30 ****5	5.00
MELITA'S	CLEANING SYSTE	:MS, LLC								
Principal Place of Business			Mailing Address				<b>U</b> < -			
6346-65 LANTANA RD. 25-C			6346-65 LANTANA RD. 25-C							
LAKE WORTH FL 33463			LAKE WORTH FL 33463				Tan 61 1546 (n) 1111 fil			<b>18</b> N <b>U</b> 11
2. Principal Place of Business			3. Mailing Address							
Suite, Apt. #, etc.			Suite, Apt. #, etc.  City & State			1st MOORE				
City & State			Zip Coun			4. FE) Num!	O5-0593 <u>67</u>	<del></del>	No.	t Applicable
- Zip	Country			Coun			e of Status Desired d Address of New F	E F	55.00 Add ee Required	
	6. Name and Address	or current regist	aran waani		Name	7. (44)(14 4)(	a Audiess of New 1	TOBIOLOGIA V	Acur	
SOSA , BROWN, ALVA 6346-65 LANTANA RD.					Street Address	(P.O. Box Num	ber is Not Acceptabl	e)		
25-C LAKE WORTH FL 33463										
	4				City		٠	FL	Zip Code	,
	named entry sugmits this	state hent for the pi	hoose of changing its	register	ed office or regis	red agent, or b	oth, in the State of El	orida. I am (a	miliar with,	and accept
-	tions of registered agent.	Brown	J 63	a.		Attend	mab	Koni	)	
SIGNATURE .	expression types or printed name of	gastered agent and title if	application (NOTE	Registere	d Agent signature requir	d when reinsteling),	Jo Va	DATE		
	/\	<u> </u>	FILE NO	W!!! I	FEE IS \$50.00					
	1	Į N	lake Check Payabl Due		orida Departm ay 1, 2005	ent of State				
9.	MANAG	ING MEMBERS/M	NAGERS	10.			ADDITIONS	/CHANGES		
RILE	MGR		☐ Detete	TITLE	· [				Change	☐ Addition
STREET ADDRESS	SOSA BROWN, ALVA 6346-65 LANTANA RD. 25-C			NAM STRE	ET ADDRESS					
CITY-ST-ZIP	LAKE WORTH FL 33463				-ST-ZIP					
DILE			☐ Delete	THT.					☐ Change	Addition
NAME STREET ADDRESS				NAM	E ADORESS					
CITY-ST-21P	}				-ST-ZiP					
FILE			☐ Defeta	1131	Ε	•			Change	Addition
NAME	ļ	_		NAM	. 1					
STREET ADDRESS		_			-S1-7IP		<del></del>		<del></del>	
OTLE			☐ Defete	1171			<del></del>		( Change	Addition
NAME	1		<b>—</b>	NAM	Œ Ì					
STREET ADDRESS										
					ET ADDRESS					
CITY-SI-ZIP			C) Dolah	CITY	·SI-70P			<del></del>	Change	□ Addition
ŀ			☐ Delete		-SI-70P				☐ Change	Addition
CITY-SI-ZIP  TITLE  NAME  STREET ADDRESS			☐ Delete	CHY THE NAM STRE	E E EEI ADDRESS				☐ Change	Addition
CITY-SI-ZIP  TITLE  NAME  STREET ADDRESS  CITY-SI-ZIP				CHTY THTE NAM STRE CHTY	F. ST- 70P  E  E  E  E  E  T  ADDRESS  F-ST- 71P				,	
CITY-51-71P  TILLE  NAME  STREET ADDRESS  CITY-51-71P  TILLE			☐ Delete	CHTY THTL NAM STRE CHTY	F. ST-ZIP  E  EEI ADDRESS (-ST-ZIP  E				Change	Addition Addition
CITY-SI-ZIP  TITLE  NAME  STREET ADDRESS  CITY-SI-ZIP				CHTY TITE NAM STRI CHTY TITE NAM	F. ST-ZIP  E  EEI ADDRESS (-ST-ZIP  E		-		,	
CITY-SI-ZIP  IIILE  NAME  STREET ADDRESS  CITY-SI-ZIP  IIILE  NAME				CATY THE NAMES STREET CATY THE NAMES STREET NAMES STREET	ST-ZIP  LE				,	
CITY-SI-ZIP  IIILE  MAME SIREEI ADDRESS CITY-SI-ZIP  IIILE  MAME SIREET ADDRESS CITY-SI-ZIP  11. I hereby	certify that the information	supplied with this fil	Delete	CITY TITL NAM STRI CITY TITL NAM STRI CITY THE exe	-SI-ZIP  E LEI LEI LEI LEI LEI LEI LEI LEI LEI	Section 119.07(3)	e)(i), Florida Statutes. th: that I am a mana	I further cert	Change	Addition
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paid by money gram TRAVILIN EXPro 53845543893