2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 24, 2007
Secretary of State

DOCUMENT# L05000070794

Entity Name: WRIGHT TOUCH MAID SERVICE, LLC

Current Principal Place of Business:

316 NE 23 AVE.
BOYNTON BEACH, FL 334352131

New Principal Place of Business:

316 NE 23 AVE.
BOYNTON BEACH, FL 334352131 US

Current Mailing Address:

316 NE 23 AVE.
BOYNTON BEACH, FL 334352131

New Mailing Address:

316 NE 23 AVE.
BOYNTON BEACH, FL 334352131 US

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WRIGHT-ROBERTS, SHARON
316 NE 23 AVE.
BOYNTON BEACH, FL 334352131 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: WRIGHT-ROBERTS, SHARON
Address: 316 NE 23 AVE.
City-St-Zip: BOYNTON BEACH, FL 334352131

Title: MGRM ( ) Delete
Name: ROBERTS, ARTHUR JR.
Address: 316 NE 23 AVE.
City-St-Zip: BOYNTON BEACH, FL 334352131

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: WRIGHT-ROBERTS, SHARON
Address: 316 NE 23 AVE.
City-St-Zip: BOYNTON BEACH, FL 334352131 US

Title: MGRM (X) Change ( ) Addition
Name: ROBERTS, ARTHUR JR.
Address: 316 NE 23 AVE.
City-St-Zip: BOYNTON BEACH, FL 334352131 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: ARTHUR ROBERTS, JR. MGRM 04/24/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date