

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000092906

FILED  
Apr 10, 2009  
Secretary of State

**Entity Name:** IDEAL COMMERCIAL CLEANING SERVICES, LLC

**Current Principal Place of Business:**

6263 CAMP LEE ROAD  
WEST PALM BEACH, FL 33417

**New Principal Place of Business:**

**Current Mailing Address:**

POB 20193  
WEST PALM BEACH, FL 33416

**New Mailing Address:**

**FEI Number:** 20-5592047

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

GUITERREZ, YUSIMIL  
6263 CAMP LEE RD  
WEST PALM BEACH, FL 33417h US

**Name and Address of New Registered Agent:**

GUITERREZ, YUSIMIL  
6263 CAMP LEE RD  
WEST PALM BEACH, FL 33417 US

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: YUSIMIL GUTIERREZ

04/10/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: NAVAS, ANDRES J  
Address: 6263 CAMP LEE ROAD  
City-St-Zip: WEST PALM BEACH, FL 33417

Title: MGRM ( ) Delete  
Name: GUITERREZ, YUSIMIL  
Address: 6263 CAMP LEE ROAD  
City-St-Zip: WEST PALM BEACH, FL 33417

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGRM (X) Change ( ) Addition  
Name: GUTIERREZ, YUSIMIL  
Address: 6263 CAMP LEE ROAD  
City-St-Zip: WEST PALM BEACH, FL 33417

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: YUSIMIL GUTIERREZ

MGRM

04/10/2009

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