

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000040686

FILED
Apr 12, 2009
Secretary of State

Entity Name: VILLA CLEANING SERVICES, LLC

Current Principal Place of Business:

642 SW PAAR DRIVE
PORT ST. LUCIE, FL 34953

New Principal Place of Business:

5021 POLARIS CV
GREENACRES, FL 33463

Current Mailing Address:

642 SW PAAR DRIVE
PORT ST. LUCIE, FL 34953

New Mailing Address:

5021 POLARIS CV
GREENACRES, FL 33463

FEI Number: 20-8859996

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SALDARRIAGA, BEATRIZ
642 SW PAAR DRIVE
PORT ST. LUCIE, FL 34953 US

Name and Address of New Registered Agent:

SALDARRIAGA, BEATRIZ
5021 POLARIS CV
GREENACRES, FL 33463 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:

04/12/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: SALDARRIAGA, BEATRIZ
Address: 642 SW PAAR DRIVE
City-St-Zip: PORT ST. LUCIE, FL 34953

Title: MGR () Delete
Name: VILLA, JOSE D
Address: 642 SW PAAR DRIVE
City-St-Zip: PORT ST. LUCIE, FL 34953

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: SALDARRIAGA, BEATRIZ
Address: 5021 POLARIS CV
City-St-Zip: GREENACRES, FL 33463

Title: MGR (X) Change () Addition
Name: VILLA, JOSE D
Address: 5021 POLARIS CV
City-St-Zip: GREENACRES, FL 33463

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: BEATRIZ SALDARRIAGA

MGR

04/12/2009

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