

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000114208

FILED  
Sep 01, 2009  
Secretary of State

**Entity Name:** QUALITY CLEANING SOLUTIONS, LLC

**Current Principal Place of Business:**

10530 BUENOS AIRES STREET  
COOPER CITY, FL 33026 US

**New Principal Place of Business:**

**Current Mailing Address:**

10530 BUENOS AIRES STREET  
COOPER CITY, FL 33026 US

**New Mailing Address:**

FEI Number: 26-3874717      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

INCRP SERVICES, INC.  
17888 67TH COURT NORTH  
LOXAHATCHEE, FL 33470 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:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: ENGLUND, GARY M  
Address: 10530 BUENOS AIRES STREET  
City-St-Zip: COOPER CITY, FL 33026 US

Title: MGRM ( ) Delete  
Name: TROIZ-ENGLUND, SUSAN  
Address: 10530 BUENOS AIRES STREET  
City-St-Zip: COOPER CITY, FL 33026 US

**ADDITIONS/CHANGES:**

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

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

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: GARY M. ENGLUND

MGRM

09/01/2009

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