2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M76958

FILED Jan 20, 2009 Secretary of State

Entity Name: SERVICE KEEPERS MAINTENANCE, INC.

Current P	Principal Place of Business:	New Principal Place of Business:
7541 N.E. MIAMI, FL	3RD PLACE . 33138	
Current N	Mailing Address:	New Mailing Address:
7541 N.E. MIAMI, FL	3RD PLACE . 33138	
FEI Number	r: 65-0044807 FEI Number Applie	For () FEI Number Not Applicable () Certificate of Status Desired ()
Name and	d Address of Current Registered	Agent: Name and Address of New Registered Agent:
BERMAN, 7541 NE 3 MIAMI, FL	, JOCELYN BRD PLACE . 33138 US	
,, . –	. 66166	
The above		ent for the purpose of changing its registered office or registered agent, or both,
The above in the Stat	e named entity submits this statem e of Florida.	ent for the purpose of changing its registered office or registered agent, or both,
The above in the Stat	e named entity submits this statem e of Florida.	
The above in the Stat SIGNATU	e named entity submits this statem e of Florida. RE:	istered Agent Date
The above in the State SIGNATU	e named entity submits this statem re of Florida. RE: Electronic Signature of Reç	istered Agent Date
The above in the Status SIGNATU Election Cau OFFICER Title: Name: Address:	e named entity submits this statem te of Florida. RE:Electronic Signature of Req Impaign Financing Trust Fund Contribu	istered Agent Date
The above in the State SIGNATU	e named entity submits this statem te of Florida. RE: Electronic Signature of Requipmaign Financing Trust Fund Contributes S AND DIRECTORS: P () Delete BERMAN, JOCELYN 7541 NE 3RD PLACE	istered Agent Date cion (). ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS Title: () Change () Addition Name: Address:

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 or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOCELYN BERMAN P 01/20/2009