

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000021431

FILED  
May 20, 2004  
Secretary of State

**Entity Name:** COMPLETE MOBILE CLEANING SERVICE, INC.

**Current Principal Place of Business:**

15242 FERNDAL RD  
FERNDAL, FL 34729

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 120039  
CLERMONT, FL 34712

**New Mailing Address:**

**FEI Number:** 59-3620501

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COLDE, PATRICK W  
2313 GRASMER CIRCLE  
CLERMONT, FL 34711

**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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: COLDE, ROBERT W  
Address: P.O. BOX 120039  
City-St-Zip: CLERMONT, FL 34712

Title: VP ( ) Delete  
Name: COLDE, PATRICK W  
Address: P.O. BOX 120039  
City-St-Zip: CLERMONT, FL 34712

Title: ST ( ) Delete  
Name: COLDE, PATRICIA A  
Address: P.O. BOX 120039  
City-St-Zip: CLERMONT, FL 34712

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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 for the exemption stated in Section 119.07(3)(i), 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:** PATRICK W. COLDE

VP

05/20/2004

Electronic Signature of Signing Officer or Director

Date