

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000056367

FILED
Sep 17, 2009
Secretary of State

Entity Name: AMERICAMAID CLEANING SERVICE, INC.

Current Principal Place of Business:

11412 SW 137 PL
MIAMI, FL 33186 US

New Principal Place of Business:

1010 CORAL RIDGE BLVD
UNIT 301
CORAL SPRINGS, FL 33071 US

Current Mailing Address:

P.O. BOX 161687
MIAMI, FL 33116 US

New Mailing Address:

1010 CORAL RIDGE BLVD
UNIT 301
CORAL SPRINGS, FL 33071 US

FEI Number: 65-1017516

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAFFIOLETTI DO REIS, LUIZ FABIO D
11412 SW 137 PL
MIAMI, FL 33186 US

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: MAFFIOLETTI DO REIS, LUIZ FABIO D
Address: 11412 SW 137 PL
City-St-Zip: MIAMI, FL 33186

Title: D (X) Delete
Name: DE LIMA DA COSTA, MARIA SANDRA
Address: 11412 SW 137 PL
City-St-Zip: MIAMI, FL 33186

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: LUIZ FABIO MAFFIOLETTI

PRES

09/17/2009

_____ Electronic Signature of Signing Officer or Director

_____ Date