2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000035707

Entity Name: TROPICAL CLEANING SERVICE INC

FILED Feb 16, 2007 Secretary of State

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Current Principal Place of Business:				New Principal Place of Business:			
1876 N UNIVERSITY DR 201F				9715 W BROWARD BLVD 332			
PLANTATION, FL 33324				PLANTATION, FL 33324			
Current Mailing Address:				New Mailing Address:			
1876 N UNIVERSITY DR 201F				9715 W BROWARD BLVD 332			
PLANTATION, FL 33324				PLANTATION, FL 33324			
FEI Number:	65-1104515	FEI Number Applied For () FEI Nur	nber Not Appli	cable ()	Certificate of Statu	s Desired ()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
CAVALCANTI, ROSE 122 WIMBLEDON LAKES DR. PLANTATION, FL 33324 US				CAVALCANTI, ROSE 122 WIMBLEDON LKS DR PLANTATION, FL 33324 US			
The above in the State		y submits this statement for	the purpose o	of changing it	s registered o	office or registered	agent, or both,
SIGNATURE: ROSE CAVALCANTI				02/16/2007			
Electronic Signature of Registered Agent				Date			
Election Can	npaign Financ	ing Trust Fund Contribution $(\)$					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	CAVALCANTI	DON LAKES DR.		Title: Name: Address: City-St-Zip:	() Change ()Addition	
Title: Name: Address: City-St-Zip:	,	() Delete		Title: Name: Address: City-St-Zip:	D (ROSALINSKI, I 122 WIMBLED PLANTATION,	ON LKS DR	
Title: Name: Address: City-St-Zip:		() Delete		Title: Name: Address: City-St-Zip:	D (CARNEIRO, EU 122 WIMBLED PLANTATION,	ON LKS DR	

I hereby certify that the information supplied with this filing does not qualify for the 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: ROSE CAVALCANTI D 02/16/2007