## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000035707

Entity Name: TROPICAL CLEANING SERVICE INC.

FILED Apr 23, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

9715 W BROWARD BLVD 332 PLANTATION, FL 33324

Current Mailing Address: New Mailing Address:

9715 W BROWARD BLVD 332 PLANTATION, FL 33324

FEI Number: 65-1104515 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

CAVALCANTI, ROSE

7481 NW 11TH PL

PLANTATION FL 23212 LIS

ROSALINSKI, ROSE

7481 NW 11TH PL

PLANTATION FL 2321

PLANTATION, FL 33313 US PLANTATION, FL 33313 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: ROSE ROSALINSKI 04/23/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 D
 ( ) Delete
 Title:
 P
 (X) Change ( ) Addition

 Name:
 CAVALCANTI, ROSE
 Name:
 ROSALINSKI, ROSE

 Address:
 7481 NW 11TH PL
 Address:
 7481 NW 11TH PL

 Address:
 7481 NW 11TH PL
 Address:
 7481 NW 11TH PL

 City-St-Zip:
 PLANTATION, FL 33313
 City-St-Zip:
 PLANTATION, FL 33313

 Title:
 O
 ( ) Delete
 Title:
 V P
 (X) Change ( ) Addition

 Name:
 ROSALINSKI, LUIZ M
 Name:
 ROSALINSKI, LUIZ M

Title: O ( ) Delete Title: T (X) Change ( ) Addition

 Name:
 CARNEIRO, EUGENIO L
 Name:
 CARNEIRO, EUGENIO L

 Address:
 7481 NW 11TH PL
 Address:
 7481 NW 11TH PL

 City-St-Zip:
 PLANTATION, FL 33313
 City-St-Zip:
 PLANTATION, FL 33313

Title: ( ) Delete Title: O ( ) Change (X) Addition

 Name:
 Name:
 CARNEIRO, RAFAEL JR.

 Address:
 Address:
 7481 NW 11 PL

 City-St-Zip:
 City-St-Zip:
 PLANTATION, FL 33313

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: ROSE ROSALINSKI D 04/23/2009