2004 FOR PROFIT CORPORATION

Jan 16, 2004 08:00 AM Secretary of State ANNUAL REPORT DOCUMENT # P01000041301 1. Entity Name FLORIDA HOTEL CLEANING SERVICE INC. Principal Place of Business Mailing Address 10 FLORAL AVENUE 10 FLORAL AVENUE KEY WEST, FL 33040 KEY WEST, FL 33040 01082004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-1103966 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CHWOJKO, EDWARD DO NOT WRITE 10 FLORAL AVENUE KEY WEST, FL 33040 IN THIS SPACE 5. 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. I am familiar with, and accept he the obligations of registered agent. SIGNATURE. (NOTE, Registered Agont signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE CHWOJKO, EDWARD NAME 10 FLORIDA AVENUE STREET ADDRESS CITY-ST-ZIP KEY WEST, FL 33040 U000000005057 01/16/04-80019-014 150.00 TITLE NAME STREET ADDRESS CITY ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY - ST - ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

12. I hereby certify that the information supplied with this filling does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

FILED