

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000058632

FILED
Apr 30, 2003
Secretary of State

Entity Name: JANITORIAL SERVICE GROUP OF CENTRAL FLORIDA, INC.

Current Principal Place of Business:

3501 W.VINE STREET
SUITE # 271
KISSIMMEE, FL 34741

New Principal Place of Business:

Current Mailing Address:

3501 W. VINE STREET
KISSIMMEE, FL 34741

New Mailing Address:

FEI Number: 59-3724689

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
343 ALMERIA AVENUE
CORAL GABLES, FL 33134 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

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GONZALEZ, JAVIER M
Address: 261 INDIAN POINT CIRCLE
City-St-Zip: KISSIMMEE, FL 34746

Title: VD () Delete
Name: CABELLO, MARCOS J
Address: 261 INDIAN POINT CIRCLE
City-St-Zip: KISSIMMEE, FL 34746

Title: SD () Delete
Name: GONZALEZ, JAVIER M
Address: 261 INDIAN POINT CIRCLE
City-St-Zip: KISSIMMEE, FL 34746

Title: TD () Delete
Name: GONZALEZ, JAVIER
Address: 261 INDIAN POINT CIRCLE
City-St-Zip: KISSIMMEE, FL 34746

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: GONZALEZ, JAVIER M
Address: 1919 BENTLEY CIR
City-St-Zip: KISSIMMEE, FL 34741

Title: VD (X) Change () Addition
Name: GONZALEZ, JAVIER M
Address: 1919 BENTLEY BLVD
City-St-Zip: KISSIMMEE, FL 34741

Title: SD (X) Change () Addition
Name: GONZALEZ, JAVIER M
Address: 1919 BENTLEY BLVD
City-St-Zip: KISSIMMEE, FL 34741

Title: TD (X) Change () Addition
Name: GONZALEZ, JAVIER
Address: 1919 BENTLEY BLVD
City-St-Zip: KISSIMMEE, FL 34741

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: JAVIER M. GONZALEZ

PD

04/30/2003

Electronic Signature of Signing Officer or Director

Date