


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2006 8:00 am
Secretary of State

01-23-2006 90125 036 ***150.00

DOCUMENT # P02000041395 1. Entity Name DJ CLEANING INC.					
Principal Place of Business 1906 SW 123 AVE MIAMI, FL 33175			Mailing Address 1906 SW 123 AVE MIAMI, FL 33175		
2. Principal Place of Business 13537 SW 19 lane		3. Mailing Address 13537 SW 19 lane			
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 			
City & State Miami, FL		City & State Miami, FL		4. FEI Number 01-0667994	
Zip 33175		Country Dade		Applied For <input type="checkbox"/> Not Applicable	
Zip 33175		Country Dade		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent COSTA, DANIEL 1906 SW 123 AVE MIAMI, FL 33175				7. Name and Address of New Registered Agent Name DANIEL COSTA Street Address (P.O. Box Number is Not Acceptable) 13537 SW 19 lane City Miami FL 33175	
8. 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 the obligations of registered agent. SIGNATURE <u><i>Daniel Costa</i></u> 1-17-06					
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD COSTA, DANIEL 1906 SW 123 AVE MIAMI, FL 33175		TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD COSTA, Daniel 13537 SW 19 lane Miami, FL 33175	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.					
SIGNATURE: <u><i>Daniel Costa</i></u> DANIEL COSTA 1-17-06 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					

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