

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000047859

FILED
Apr 29, 2005
Secretary of State

Entity Name: BUSY BEES CLEANING CONCEPTS, INC.

Current Principal Place of Business:

501 NW SELVITZ RD
PORT ST LUCIE, FL 34983

New Principal Place of Business:

PO BOX 882461
PORT ST LUCIE, FL 34988 US

Current Mailing Address:

501 NW SELVITZ RD
PORT ST LUCIE, FL 34983

New Mailing Address:

PO BOX 882461
PORT ST LUCIE, FL 34988 US

FEI Number: 04-3653460

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VICTA REIS, RODOLPHO
501 NW SELVITZ RD
PORT ST LUCIE, FL 34983 US

Name and Address of New Registered Agent:

SOUZA, ROBERTO R
350 DALVA ST
PORT ST LUCIE, FL 34984 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: ROBERTO R SOUZA

04/29/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PVTS () Delete
Name: VICTA REIS, RODOLPHO
Address: 414 PETALS RD
City-St-Zip: FT PIERCE, FL 34947

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SOUZA, ROBERTO R
Address: 350 DALVA ST
City-St-Zip: PORT ST. LUCIE, FL 34984 US

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: ROBERTO RODRIGUES SOUZA

PD

04/29/2005

Electronic Signature of Signing Officer or Director

Date