## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000070357

Entity Name: NEW WAY CLEANING SERVICES, INC.

FILED Mar 22, 2005 Secretary of State

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

500 VISION CT. 4468 LAKE TAHOE CIRCLE APT. 503 WEST PALM BEACH, FL 33409

PALM BEACH GARDENS, FL 33418

Current Mailing Address: New Mailing Address:

500 VISION CT.

APT. 503

PALM BEACH GARDENS, FL 33418

5350 10TH AVENUE NORTH
APT. 8
GREENACRES, FL 33463

FEI Number: 20-0001196 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:

BASOA, EMILIO F
500 VISION CT.

APT. 503

BASOA, EMILIO F
4468 LAKE TAHOE CIRCLE
WEST PALM BEACH, FL 33409 US

PALM BEACH GARDENS, FL 33418 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: EMILIO F. BASOA 03/22/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Name:
 BASOA, EMILIO F
 Name:
 BASOA, EMILIO F

 Address:
 500 VISION CT.
 Address:
 4468 LAKE TAHOE CIRCLE

 City-St-Zip:
 PALM BEACH GARDENS, FL 33418
 City-St-Zip:
 WEST PALM BEACH, FL 33409

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

Name: BASOA, FELICIA Name: BASOA, FELICIA

Address: 500 VISION CT. Address: 4468 LAKE TAHOE CIRCLE
City-St-Zip: PALM BEACH GARDENS, FL 33418 City-St-Zip: WEST PALM BEACH, FL 33409

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: EMILIO F. BASOA P/D 03/22/2005