

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000070357

FILED
Mar 06, 2007
Secretary of State

Entity Name: NEW WAY CLEANING SERVICES, INC.

Current Principal Place of Business:

4468 LAKE TAHOE CIRCLE
WEST PALM BEACH, FL 33409

New Principal Place of Business:

1690 WOODBINE WAY
1608
PALM BEACH GARDEN, FL 33418 US

Current Mailing Address:

4468 LAKE TAHOE CIRCLE
WEST PALM BEACH, FL 33409

New Mailing Address:

1690 WOODBINE WAY
1608
PALM BEACH GARDEN, FL 33418 US

FEI Number: 20-0001196

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

BASOA, EMILIO F
1690 WOODBINE WAY
1608
PALM BEACH GARDEN, 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:

03/06/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BASOA, EMILIO F
Address: 4468 LAKE TAHOE CIRCLE
City-St-Zip: WEST PALM BEACH, FL 33409

Title: VD () Delete
Name: BASOA, FELICIA
Address: 4468 LAKE TAHOE CIRCLE
City-St-Zip: WEST PALM BEACH, FL 33409

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BASOA, EMILIO F
Address: 1690 WOODBINE WAY
City-St-Zip: PALM BEACH GARDEN, FL 33418 US

Title: VD (X) Change () Addition
Name: BASOA, FELICIA
Address: 1690 WOODBINE WAY
City-St-Zip: PALM BEACH GARDEN, FL 33418

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 BASOA, FELICIA BASOA

PD

03/06/2007

Electronic Signature of Signing Officer or Director

Date