

2006 FOR PROFIT CORPORATION ANNUAL REPORT

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Apr 24, 2006 8:00 am
Secretary of State

04-24-2006 90355 027 ***150.00

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04172006 Chg-P CR2E034 (11/05)

DOCUMENT # P02000101833

1. Entity Name
SPOTLESS CONSTRUCTION CLEANING SERVICES, INC.



Principal Place of Business
1975 E SUNRISE BLVD
SUITE 820
FORT LAUDERDALE, FL 33304

Mailing Address
1975 E SUNRISE BLVD
SUITE 820
FORT LAUDERDALE, FL 33304

2. Principal Place of Business
1975 E. Sunrise Blvd
Suite, Apt. #, etc.
Suite 400
City & State
Fort Lauderdale, FL
Zip
33304

3. Mailing Address
1975 E. Sunrise Blvd.
Suite, Apt. #, etc.
Suite 400
City & State
Fort Lauderdale, FL
Zip
33304

4. FEI Number
56-2294580

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
JAIMES, ORLANDO F
1975 E SUNRISE BLVD
SUITE 820
FORT LAUDERDALE, FL 33304

7. Name and Address of New Registered Agent
Name
Orlando F. Jaimes
Street Address (P.O. Box Number is Not Acceptable)
1975 E. Sunrise Blvd.
Suite 400
City
Fort Lauderdale FL Zip Code
33304

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 *[Signature]* Orlando F. Jaimes 4/17/06
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. ☐ \$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	DP JAIMES, ORLANDO F 1975 E. SUNRISE BLVD, STE 820 FORT LAUDERDALE, FL 33304 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Jaimes, Orlando F <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1975 E. Sunrise Blvd Ste 400 Fort Lauderdale, FL 33304
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV JAIMES, YVETTE 1975 E. SUNRISE BLVD, STE 820 FORT LAUDERDALE, FL 33304 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Jaimes, Yvette <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1975 E. Sunrise Blvd Ste 400 Fort Lauderdale, FL 33304
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: *[Signature]* Orlando F. Jaimes 4/17/06 (954) 288-8982
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #