

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 29, 2004 8:00 am
Secretary of State

03-29-2004 90022 005 ***150.00

DOCUMENT # P03000042095					
1. Entity Name A&L CLEANING SERVICES OF THE KEYS, INC.					
Principal Place of Business 1213 14TH STREET LOT Y KEY WEST, FL 33040			Mailing Address 1213 14TH STREET LOT Y KEY WEST, FL 33040		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 51-0459481	
6. Name and Address of Current Registered Agent DESANTIS, SAM 1213 14TH STREET LOT Y KEY WEST, FL 33040				7. Name and Address of New Registered Agent	
				Name	
				Street Address (P O Box Number is Not Acceptable)	
				City	
				FL Zip Code	
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 _____ <small>Signature, typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature is required when filing.)</small> DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 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	P	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	DESANTIS, ANNA		NAME		
STREET ADDRESS	1213 14TH STREET LOT Y		STREET ADDRESS		
CITY-ST-ZIP	KEY WEST, FL 33040		CITY-ST-ZIP		
TITLE	VP	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	GARTENMAYER, LAURI		NAME		
STREET ADDRESS	1213 14TH STREET LOT Y		STREET ADDRESS		
CITY-ST-ZIP	KEY WEST, FL 33040		CITY-ST-ZIP		
TITLE	S	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	GARTENMAYER, FRED		NAME		
STREET ADDRESS	1213 14TH STREET LOT Y		STREET ADDRESS		
CITY-ST-ZIP	KEY WEST, FL 33040		CITY-ST-ZIP		
TITLE	T	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	DESANTIS, SAM		NAME		
STREET ADDRESS	1213 14TH STREET LOT Y		STREET ADDRESS		
CITY-ST-ZIP	KEY WEST, FL 33040		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify 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 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>Anna de Santis</u> PRESIDENT			Date: <u>3-21-04</u>		Daytime Phone #: <u>305 296 5865</u>
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date</small>		<small>Daytime Phone #</small>