

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000042569

Entity Name: C & S JANITORIAL SERVICES, INC.

FILED
Apr 25, 2007
Secretary of State

Current Principal Place of Business:

P.O. BOX 160276
ALTAMONTE SPRINGS, FL 327160276 US

New Principal Place of Business:

360 RADEBAUGH DR
LONGWOOD, FL 32779 US

Current Mailing Address:

P O BOX 32716-0276
ALTAMONTE SPRINGS, FL 327160276 US

New Mailing Address:

P O BOX 160276
ALTAMONTE SPRINGS, FL 32716 US

FEI Number: 04-3750932

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PROFESSIONAL ACCOUNTANTS & CONSULTANTS INC
2471 E SEMORAN BLVD
APOPKA, FL 32703 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: MARTINS, CESAR
Address: P.O BOX 160276
City-St-Zip: ALTAMONTE SPRINGS, FL 327160276

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: MARTINS, CESAR
Address: P.O BOX 160276
City-St-Zip: ALTAMONTE SPRINGS, FL 32716 US

I hereby certify that the information supplied with this filing does not qualify 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: CESAR MARTINS

PTD

04/25/2007

Electronic Signature of Signing Officer or Director

Date