

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 23, 2007 8:00 am**  
**Secretary of State**

**DOCUMENT # P03000052690**

1. Entity Name  
LOREN CLEANING SERVICES, INC.



04-23-2007 90115 001 \*\*\*150.00  
04-23-2007 90115 002 \*\*\*\*\*8.75

Principal Place of Business  
900 NE 48 ST LOT 50  
POMPANO BEACH, FL 33064

Mailing Address  
900 NE 48 ST LOT 50  
POMPANO BEACH, FL 33064

2. Principal Place of Business - No P.O. Box #  
917 NE. 12 AVE.

3. Mailing Address  
917 NE. 12 AVE N

Suite, Apt. #, etc.  
APT. A

Suite, Apt. #, etc.  
APT. A

City & State

POMPANO BEACH.

City & State

POMPANO BEACH

Zip

33060

Country

BROWARD.

Zip

33060.

Country

BROWARD.

03272007

Chg-P

CR2E034 (12/06)

4. FEI Number  
72-1563678

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

NEWELL, LORENZA  
900 NE 48 ST LOT 50  
POMPANO BEACH, FL 33064

7. Name and Address of New Registered Agent

Name: LOREN CLEANING SERVICES INC.

Street Address (P.O. Box Number is Not Acceptable)

917 NE. 12 AVE, APT A

POMPANO BEACH.

City

BROWARD.

FL

Zip Code

33060

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

*Lorenza Newell*

04.16.07

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, 2007 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution.

☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE  
NAME PVST  
STREET ADDRESS NEWELL, LORENZA  
CITY-ST-ZIP 900 NE 48 ST LOT 50  
POMPANO BEACH, FL 33064 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
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STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME LOREN CLEANING SERVICES INC. ☒ Change ☐ Addition  
STREET ADDRESS 917 NE. 12 AVE  
CITY-ST-ZIP APT A  
POMPANO BEACH FLA 33060

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ 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:

*Lorenza Newell*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #