

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000054624

FILED
Oct 22, 2005
Secretary of State

Entity Name: THE AMAZON CLEANING SERVICES INC.

Current Principal Place of Business:

2077 SHANNON LAKES BLVD
KISSIMMEE, FL 34743 US

New Principal Place of Business:

Current Mailing Address:

2077 SHANNON LAKES BLVD
KISSIMMEE, FL 34743 US

New Mailing Address:

FEI Number: 90-0081282

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PALOMINO, CARLOS M
3501 W VINE ST
STE 262
KISSIMMEE, FL 34741 US

Name and Address of New Registered Agent:

PALOMINO, CARLOS M
3501 W. VINE ST
STE 262
KISSIMMEE, FL 34741 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: CARLOS M. PALOMINO

10/22/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: NIEVES, SONIA
Address: 2077 SHANNON LAKES BLVD
City-St-Zip: KISSIMMEE, FL 34743 US

Title: VP () Delete
Name: NIEVES, LISSETTE
Address: 2077 SHANNON LAKES BLVD
City-St-Zip: KISSIMMEE, FL 34743 US

Title: D () Delete
Name: ELENO, ROSA
Address: 2077 SHANNON LAKES BLVD
City-St-Zip: KISSIMMEE, FL 34743 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: SONIA NIEVES

P

10/22/2005

Electronic Signature of Signing Officer or Director

Date