

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 16, 2007 08:00 AM
Secretary of State

DOCUMENT # P03000059527

1. Entity Name
EMERALD CLEANING SERVICES, INC.



Principal Place of Business
820 ALABAMA AVE.
FT. LAUDERDALE, FL 33312

Mailing Address
820 ALABAMA AVE.
FT. LAUDERDALE, FL 33312

DO NOT WRITE IN THIS SPACE



07062007 No Chg-P CR2E034 (11/05)

4. FCI Number
58-2676777

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

FLEMING, TED
820 ALABAMA AVE.
FT. LAUDERDALE, FL 33312

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IN THIS SPACE**

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 typed or printed name of registered agent and filer if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

FILE NOW!!! FEE IS \$150.00
Due by September 14, 2007

9. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

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

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	FLEMING, TED
STREET ADDRESS	820 ALABAMA AVE.
CITY, ST, ZIP	FT. LAUDERDALE, FL 33312
TITLE	STD
NAME	FLEMING, RHONDA
STREET ADDRESS	820 ALABAMA AVE.
CITY, ST, ZIP	FT. LAUDERDALE, FL 33312
TITLE	VD
NAME	SOLOMON, WAYNE W
STREET ADDRESS	820 ALABAMA AVE.
CITY, ST, ZIP	FT. LAUDERDALE, FL 33312
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

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07/16/07-80009-012 150.00

**DO NOT WRITE
IN THIS SPACE**

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 or other like empowered.

SIGNATURE:

TED FLEMING
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

07/13/07
Date

Daytime Phone #