## 2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

## DOCUMENT # P03000061714

SIGNATURE:



## FILED Apr 13, 2004 8:00 am Secretary of State

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(286)210-14 98

J.P.S. CLEANING AND MAINTENANCE, CORP. Principal Place of Business Mailing Address REGICUPE 9601 SW 142 AVENUE #822 9601 SW 142 AVENUE #822 MIAMI, FL 33186 MIAMI, FL 33186 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01122004 CR2E034 (10/03) City & State City & State 4. FEI Number Applied Fo 01-0786386 Not Applic Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name PEREZ, JAIRO Street Address (P.O. Box Number is Not Acceptable) 9601 SW 142 AVENUE #822 MIAMI, FL 33186 City Zip Code 8. The above named entity submits this iging its registered office or registered agent, or both, in the State of Florida. ed agen the obligations of registe SIGNATURE £ ped or printed name of registered agent and title if applic 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2004 Fee will be \$550.00 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. Delete TITLE Change TIELE NAME PEREZ, JAIRO NAME STREET ADDRESS 9601 SW 142 AVENUE #822 STREET ADDRESS CITY-ST-ZiP MIAMI, FL 33186 CITY-ST-ZiP TITLE Delete TITLE ☐ Change ☐ Ad NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZiP CITY-ST-ZiP Delete TITLE ☐ Ad NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7:P CITY-ST-ZIP Delete ☐ Ad TITLE TITLE Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP ☐ Ad Delete TITLE ☐ Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change Ad TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this fifing does not qualify or the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the informati indicated on this report of supplemental jepor 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 direct 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 changed, or on an attachment with an address, with all other like empowered.