


2004 FOR PROFIT CORPORATION ANNUAL REPORT

PS 1 82

DOCUMENT # P03000071148			
1. Entity Name TORRES CLEANING SERVICES, CORP.			
Principal Place of Business 7401 NW 85 ST #104 TAMARAC, FL 33321		Mailing Address 7401 NW 85 ST #104 TAMARAC, FL 33321	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

FILED
04 OCT 12 PM 2:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



09272004 Chg-P CR2E034 (10/03)

4. FEI Number 47-0923688	Applied For <input type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent GUEVARA, ENRIQUE 630 S. S.R. 7 MARGATE, FL 33068		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
Due by September 8, 2004**

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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P TORRES, IRENE P 7401 NW 85 ST #104 TAMARAC, FL 33321 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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10/14/04--01043--002 **150.00

12. I hereby certify that the information supplied with this filing does not qualify 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 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: June B. Torres
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10-03-04
Date

754 8227488
Daytime Phone #

TORRES CLEANING SERVICES, INC
7401 NW 85 STREET SUITE # 104
TAMARAC-FLORIDA-33321
DOCUMENT# P-03000071148
EIN # 47-0923688

SECRETARY OF STATE
DIVISION OF CORPORATIONS
REINSTATEMENT SECTION
409 EAST GAINES STREET
TALLAHASSEE, FLORIDA-32314

TO WHOM IT MAY CONCERN

I IRENE PENA TORRES SUBMITTING THIS LETTER TO INFORM YOU THAT
THE REASON FOR ME NOT HAVING SENT THE ANNUAL REPORT YOU BECAUSE
I DID NOT RECEIVED THE FORM (2004 FOR PROFIT CORPORATION ANNUAL
REPORT)

ATTACHED YOU WILL FIND A CKECK IN THE AMOUNT OF US 150.00 WICH
IS THE FEE FOR ONE YEARS, PLEASE ACCEPT THIS FEE.

SINCERELY,


IRENE PEÑA TORRES

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