2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

Jul 09, 2004 8:00 am **Secretary of State DOCUMENT # P03000072951** 1. Entity Name 07-09-2004 90009 019 ***150.00 CORVISON CLEANING SERVICES, INC. Principal Place of Business Mailing Address 8151 S.W. 202 TERRACE 8151 S.W. 202 TERRACE **DUNNELLON, FL 34431** DUNNELLON, FL 34431 2. Principal Place of Business 3. Mailing Address 21810 SW Anchor Blud 218105W Anchon Blud Suite, Apt. #, etc. Suite, Apt. #, etc. 07062004 Cha-P CR2E034 (10/03) City & State City & State 4. FEI Number Applied For Florida Dunnellan Florida Dunnellon 13-4256166 Not Applicable \$8.75 Additional 34471 5. Certificate of Status Desired MARIST MARION Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent CÖRVISON, MARIA S Street Address (P.O. Box Number is Not Acceptable) 1225 NW 106 COURT OCALA, FL 34482 Zip Code 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 MARIA S. CORUSON ne of registered agent and title if applicable. 9. Election Campaign Financing FILE NOW!!! FEE IS \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees Due by September 8, 2004 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. TITLE ☐ Delete TITLE ☐ Change Addition CORVISON, MARIA S NAME NAME 1225 NW 106 COURT STREET ADDRESS STREET ADDRESS OTY-ST-7P OCALA, FL 34482 CITY-ST-7/P TITLE ☐ Delete THE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STRÉET AODRESS CITY-ST-ZIP CTY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITI E ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling 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 prijer like empowered. SIGNATURE: PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

Attention 54061108 CORVISON CLEANING SERVICE 21810 SW ANCHOR BOULEVARD DUNNELLON, FL 34431 352-465-6399 \$\frac{1}{44}\rho_{03}\rightarrow_{2951}\righta

July 6, 2004

Division of Corporations PO Box 1500 Tallahassee, FL 32302-1500

Re: 2004 Annual Report

To Whom It May Concern:

This letter serves as notification to the Division of Corporations, that I did not receive my notice regarding my Annual Report. I have relocated twice in the last twelve months, and although I have filed change of address notices with the Post Office, as well as the Department of Corporations, each time I moved. To date, I have not received all of my mail that was sent to my old addresses. Therefore, I am requesting that the penalty for late filing be waived.

I have enclosed with this letter, my Annual Report Filing and the appropriate fee less the penalty. I have updated all information in order to avoid this problem in the future.

You can contact me at, 352-465-6399, should you need any further information to process my Annual it be necessary, to process the filing of my Report.

Thank you,

Corvison Cleaning Service Maria Corvison, Owner