

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000075477

FILED
Jan 31, 2004
Secretary of State

Entity Name: GIVANS JANITORIAL SERVICE INC

Current Principal Place of Business:

324 9TH STREET
LAKE PARK, FL 33403

New Principal Place of Business:

Current Mailing Address:

324 9TH STREET
LAKE PARK, FL 33403

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GIVANS, EVOTHA
324 9TH STREET
LAKE PARK, FL 33403

Name and Address of New Registered Agent:

GIVANS, EVOTTA
324 9TH STREET
LAKE PARK, FL 33403

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: EVOTTA GIVANS

01/31/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GIVANS, EVOTTA
Address: 324 9TH STREET
City-St-Zip: LAKE PARK, FL 33403

Title: V () Delete
Name: GIVANS, PATRICK
Address: 324 9TH STREET
City-St-Zip: LAKE PARK, FL 33403

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: GIVANS, PATRICK
Address: 324 9TH STREET
City-St-Zip: LAKE PARK, FL 33403

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: EVOTTA GIVANS

PRES

01/31/2004

Electronic Signature of Signing Officer or Director

Date