2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Aug 23, 2004 8:00 am Secretary of State DOCUMENT # P03000097490 08-23-2004 90018 050 ***158.75 S C S CLEANING SERVICES, INC. Principal Place of Business 950 CONSTITUTION DRIVE UNIT C 950 CONSTITUTION DRIVE UNIT C 54069551 HOMESTEAD, FL 33030 HOMESTEAD, FL 33030 2. Principal Place of Business 3. Mailing Address 1661 1661 S Suite, Apt. #, etc 08202004 CR2E034 (10/03) City & State 4. FEI Number Applied For 20-0204399 Homestea Not Applicable Country \$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 -JONES THOMPSON, SONJA D Street Address (P.O. Box Number is Not Acceptable) 950 CONSTITUTION DRIVE UNIT C HOMESTEAD, FL 33030 Zip Code **33035** 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 (NOTE, Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. corporation did not receive the prior notice. Due by September 8, 2004 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE ☐ Defete TITLE JONES THOMPSON, SONJA D NAME NAME 1661 SE 1754 STREET ADDRESS 950 CONSTITUTION DRIVE UNIT C STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP HOMESTEAD, FL 33030 Homes lead TITLE ☐ Delete TIBE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE . Change ___ Addition -NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAMÉ NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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

FILED

SOUTHWEST ACCOUNTING CENTER, INC.

ATTACAMENT 54069551

P.O. BOX 971577 Miami, Fl 33197-1577

Phone 305-255-2511

Fax: 305-255-7313

E-mail: swacctg@bellsouth.net

August 20, 2004

RE: S C S Cleaning Services, Inc.

P03000097490

Gentlemen:

Please be advised that our client did not receive the UBR for 2004 and therefore was not aware that they needed to file this form. Enclosed please find the UBR filled out with the NEW ADDRESS. Enclosed please find a check in the amount of \$158.75. Please waive the \$400.00 penalty.

If you need any further information, please feel free to contact me.

Sincerely,

SOUTHWEST ACCOUNTING CENTER, INC.

Regina L'Ioret President

RLL/cll,

enc.