

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000101764

FILED
Aug 21, 2005
Secretary of State

Entity Name: L & M RESTORATION AND JANITORIAL SERVICES, INC.

Current Principal Place of Business:

2122 AMBASSADOR CT.
ORLANDO, FL 32808 US

New Principal Place of Business:

629 IVANHOE WAY
CASSELBERRY, FL 32707 US

Current Mailing Address:

2122 AMBASSADOR CT.
ORLANDO, FL 32808 US

New Mailing Address:

629 IVANHOE WAY
CASSELBERRY, FL 32707 US

FEI Number: 87-0707867

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BADIE, LUVILLA W
2122 AMBASSADOR CT.
ORLANDO, FL 32808 US

Name and Address of New Registered Agent:

BUTLER, MICHAEL D
629 IVANHOE WAY
CASSELBERRY, FL 32707 US

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: MICHAEL D BUTLER

08/21/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BUTLER, LUVILLA W
Address: 2122 AMBASSADOR CT.
City-St-Zip: ORLANDO, FL 32808 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BUTLER, MICHAEL D
Address: 629 IVANHOE WAY
City-St-Zip: CASSELBERRY, FL 32707 US

Title: VP () Change (X) Addition
Name: BUTLER, LUVILLA W
Address: 629 IVANHOE
City-St-Zip: CASSELBERRY, FL 32707 US

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: MICHAEL BUTLER

P

08/21/2005

Electronic Signature of Signing Officer or Director

Date