


FILED
Feb 28, 2008 8:00 am
Secretary of State

40035017

DOCUMENT # P03000103150				02-28-2008 90018 034 ***150.00	
1. Entity Name ROMAN CLEANING SERVICES, INC.					
Principal Place of Business 5351 N.W. 200 TERR. OPA LOCKA, FL 33055		Mailing Address 5351 N.W. 200 TERR. OPA LOCKA, FL 33055			
2. Principal Place of Business - No P.O. Box # 5351 NW 200 TERR		3. Mailing Address 5351 NW 200 TERR			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State MIAMI GARDENS, FL		City & State MIAMI GARDENS, FL		4. FEI Number 20-0261247	
Zip 33055		Country USA		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent ROMAN, JULIO E 5351 N.W. 200 TERR. OPA LOCKA, FL 33055 MIAMI GARDENS, FL 33055				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL 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 the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D ROMAN, JULIO E 5351 N.W. 200 TERR. OPA LOCKA, FL 33055	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D ROMAN, JULIO E 5351 NW 200 TERR MIAMI GARDENS, FL 33055	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D ROMAN, LUZ M 5351 N.W. 200 TERR. OPA LOCKA, FL 33055	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D ROMAN, LUZ M 5351 NW 200 TERR MIAMI GARDENS, FL 33055	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D ROMAN, JULIO JR. 16410 MIAMI DR., APT. #707 NORTH MIAMI BEACH, FL 33162	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: <u>Julio E Roman</u> <u>Julio E Roman, President</u> 01/22/08 (86)355-1799					