

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000109692

Entity Name: CUSTOM MAIDS INC.

FILED
Jan 28, 2009
Secretary of State

Current Principal Place of Business:

930 38 AVE NE
ST PETERSBURG, FL 337041636

New Principal Place of Business:

Current Mailing Address:

930 38 AVE NE
ST PETERSBURG, FL 337041636

New Mailing Address:

FEI Number: 20-0289808

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PALMERINO, ANTHONY
930 38 AVE NE
ST PETERSBURG, FL 337041636 US

Name and Address of New Registered Agent:

ZOMERMAAND, TONI
930 38 AVE NE
ST PETERSBURG, FL 337041636 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: TONI ZOMERMAAND

01/28/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PALMERINO, ANTHONY
Address: 930 38 AVE NE
City-St-Zip: ST PETERSBURG, FL 337041636

Title: VP () Delete
Name: PALMERINO, TONI D
Address: 930 38 AVE NE
City-St-Zip: ST PETERSBURG, FL 337041636

Title: VP (X) Delete
Name: PALMERINO, JACLYN N
Address: 930 38 AVE NE
City-St-Zip: ST PETERSBURG, FL 337041636

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ZOMERMAAND, TONI D
Address: 930 38 AVE NE
City-St-Zip: ST PETERSBURG, FL 337041636

Title: VP (X) Change () Addition
Name: BEAULIEU, JACLYN N
Address: 930 38 AVE NE
City-St-Zip: ST PETERSBURG, FL 337041636

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: TONI ZOMERMAAND

P

01/28/2009

Electronic Signature of Signing Officer or Director

Date