

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 20, 2004 8:00 am
Secretary of State

05-20-2004 90007 034 ***158.75

44045767



DOCUMENT # P03000111440 1. Entity Name "V" PROFESSIONAL KLEENING CORP.					
Principal Place of Business 1901 PLANTATIONKEY CIRCLE 201 BRANDON, FL 33511 US			Mailing Address 1901 PLANTATIONKEY CIRCLE 201 BRANDON, FL 33511 US		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		03122003 Chg-P CR2E034 (10/03)	
4. FEI Number 20-0285985				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MORALES, JOSE T 1901 PLANTIONKEY CIRCLE 201 BRANDON, FL 33511			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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MORALES, JOSE T 1901 PLANTAIONKEYCIRCLE APT 201 BRANDON, FL 33511	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP CIFUENTES, CAROLINA L 1901 PLANTAIONKEY CIRCLE APT 201 BRANDON, FL 33511	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete				
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete				
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 changed, or on an attachment with an address, with all other like empowered.			SIGNATURE: <u>Jose Morales</u> 5/14/04 83-785-1433		

ATTACHMENT

44045767

May 14, 2004

Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302

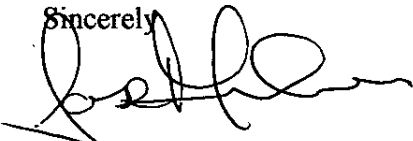
Ref: V Professional Kleening Corp
Doc#: P03000111440
EIN#: 20-0285985

Division of Corporation:

Per your request attached is a copy of our 2004 Corporation Annual Report. We did not receive a prior notice in reference to our annual filing, due to this we are filing late. Please see attached a copy of our Annual report and a check payable to your office.

Thank you for your time if you have any questions please feel free to contact me at 813-643-0888, Jose Morales or Carolina Cifuentes.

Sincerely,



Jose T. Morales
President