

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000119488

FILED
Apr 15, 2007
Secretary of State

Entity Name: CHAIRMAN'S CLEANING SERVICE, INC.

Current Principal Place of Business:

1802 N. UNIVERSITY DR.
BOX 239
PLANTATION, FL 33322

New Principal Place of Business:

Current Mailing Address:

1802 N. UNIVERSITY DR.
BOX 239
PLANTATION, FL 33322

New Mailing Address:

FEI Number: 20-0586333 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBINSON, MAJORIE D
1802 N. UNIVERSITY DR.
BOX 239
PLANTATION, FL 33322 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: FISHER, SAMUEL
Address: 5670 MIDDLE COH DR
City-St-Zip: WEST PALM BEACH, FL 33413

Title: SD () Delete
Name: FISHER, CHADINE
Address: 7201 NW 16TH ST., #E285
City-St-Zip: FORT LAUDERDALE, FL 33313

Title: MGRD () Delete
Name: ROBINSON, MARJORY
Address: 7201 NW 16TH ST., #E285
City-St-Zip: FORT LAUDERDALE, FL 33313

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: MGRD (X) Change () Addition
Name: ROBINSON, MARJORIE D
Address: 7201 NW 16TH ST., #E285
City-St-Zip: FORT LAUDERDALE, FL 33313

I hereby certify that the information supplied with this filing does not qualify for the 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: MARJORIE D. ROBINSON

MGRD

04/15/2007

Electronic Signature of Signing Officer or Director

_____ Date