May 02, 2005 8:00 am Secretary of State 2005 FOR PROFIT CORPORATION **ANNUAL REPORT** 05-02-2005 90491 043 ***150.00 DOCUMENT # P03000124295 1. Entity Name KID GLOVES EXTERIOR CLEANING, INC. Principal Place of Business Mailing Address 3705 31ST AVE WEST 3705 31ST AVE WEST BRADENTON, FL 34205 BRADENTON, FL 34205 Principal Place of Business Suite, Apt. #, etc CR2E034 (10/03) 03102005 Chq-P 4. FEI Number Applied For 52-2413014 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Name and Address of Current Registered Agent Name and Address of New Registered Agent COMERFORD, BRIAN P 3705 31ST ÁVE WEST BRADENTON, FL 34205 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. egistered agent and title if applicable (NOTE, Registered Agent signature required when reinstating) 9. Election Campaign Financing **\$5.00** May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2005 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. Р TITLE TITLE Change Addition ☐ Delete BRIANY NAME COMERFORD, BRIAN P NAME (VAN DOR A TERR 3705 31ST AVE WEST STREET ADDRESS STREET ADDRESS BRADENTON, FL 34205 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE Delete TITLE (Change TERRIE, RICHARD NAME NAME STREET ADDRESS **3705 31ST AVE WEST** STREET ADDRESS BRADENTON, FL 34205 CITY-ST-ZIF ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change moulibbA 🔲 NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 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 attactment with an address, with all other like empowered.

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