

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # P03000131685

1. Entity Name

DARREL'S CLEANING SERVICES INC.



FILED

04 APR 30 PM 2:39

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



MOORE CR2E034 (11/03)

Principal Place of Business

2301 OLD BAINBRIDGE RD, L 1305  
TALLAHASSEE FL 32303

Mailing Address

2301 OLD BAINBRIDGE RD, L 1305  
TALLAHASSEE FL 32303

2. Principal Place of Business

4099 Blind Brook Court

Suite, Apt. #, etc.

3. Mailing Address

4099 Blind Brook Court

Suite, Apt. #, etc.

City & State

Tallahassee FL

City & State

Tallahassee, FL

4. FEI Number

52-2414218

Applied For

Not Applicable

Zip

32303

Country

USA

Zip

32303

Country

USA

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

JONES, DARREL  
2301 OLD BAINBRIDGE RD, L 1305  
TALLAHASSEE FL 32303

7. Name and Address of New Registered Agent

Name

Darrel Jones

Street Address (P.O. Box Number is Not Acceptable)

4099 Blindbrook Court

City

Tallahassee

FL

Zip Code

32303

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

*[Signature]*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4/20/04

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P ☐ Delete  
NAME JONES, DARREL  
STREET ADDRESS 2301 OLD BAINBRIDGE RD, L 1305  
CITY-ST-ZIP TALLAHASSEE FL 32303

TITLE VP ☐ Delete  
NAME JONES, JONA  
STREET ADDRESS 2301 OLD BAINBRIDGE RD, L 1305  
CITY-ST-ZIP TALLAHASSEE FL 32303

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Darrel Jones - President ☐ Change ☐ Addition  
NAME  
STREET ADDRESS 4099 Blind Brook Court  
CITY-ST-ZIP Tallahassee, FL 32303

TITLE Jona Jones, VP ☐ Change ☐ Addition  
NAME  
STREET ADDRESS 4099 Blindbrook Court  
CITY-ST-ZIP Tallahassee, FL 32303

TITLE 400036058354 ☐ Change ☐ Addition  
NAME  
STREET ADDRESS 05/11/04--01052--008 \*\*\*150.00  
CITY-ST-ZIP

TITLE KM ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
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 attachment with an address, with all other like empowered.

SIGNATURE:

*[Signature]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/04 559-0182  
Date Daytime Phone #