2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 15, 2008
Secretary of State

DOCUMENT# P03000141313

Entity Name: TOTAL JANITORIAL AND PAINTING SERVICES, INC.

Current Principal Place of Business:

2322 CEDAR GARDEN DR
ORLANDO, FL 32824

New Principal Place of Business:

Current Mailing Address:

2322 CEDAR GARDEN DR
ORLANDO, FL 32824

New Mailing Address:

FEI Number: 20-0417680 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

BONNICE, CAROL
2322CEDAR GARDEN DR
ORLANDO, FL 32824 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: PTSV ( ) Delete
Name: BONNICE, CAROL
Address: 2322 CEDAR GARDEN DR
City-St-Zip: ORLANDO, FL 32824

Title: VP ( ) Delete
Name: CAROL, BONNICE
Address: 2322 CEDAR GARDEN DR
City-St-Zip: ORLANDO, FL 32824

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D ( ) Change (X) Addition
Name: BONNICE, KARINA
Address: 2332 CEDAR GARDEN DR.
City-St-Zip: ORLANDO, FL 32824

Title: D ( ) Change (X) Addition
Name: RAMSBOTT, LUIS E
Address: 2332 CEDAR GARDEN DR
City-St-Zip: ORLANDO, FL 32824

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: CAROL BONNICE PTSV 01/15/2008

Electronic Signature of Signing Officer or Director — Date