2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000158326

Entity Name: MAHOOD CLEANING SERVICES, INC.

FILED Mar 16, 2004 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:			
4742 SE AN SUITE 6 STUART, F	ICHOR AVE L 34997					
Current Mailing Address:			New Mailing Address:			
4742 SE AN SUITE 6 STUART, F	ICHOR AVE L 34997					
FEI Number:	El Number: 58-2678411 FEI Number Applied For ()		FEI Number Not Applicable ()		Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:			
2440 SE FE SUITE X	TI, NICHOLAS DERAL HWY L 34994 US	S				
The above in the State		bmits this statement for the pu	urpose of changing it	s registered off	fice or registered agen	t, or both,
SIGNATUR	E:					
	Electronic	Signature of Registered Age	nt	Date		
Election Cam	paign Financing 1	Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	D () D MAHOOD, CARO 4742 SE ANCHO STUART, FL 349	_ A R AVE SUITE 6	Title: Name: Address: City-St-Zip:	() (Change () Addition	
Title: Name: Address: City-St-Zip:	D () C MAHOOD, ROY E 4742 SE ANCHOI STUART, FL 349	II R AVE SUITE 6	Title: Name: Address: City-St-Zip:	V (X) (SEGABARTH, RO 804 STAFFORD STUART, FL 349	DR	
Title: Name: Address: City-St-Zip:	() [elete	Title: Name: Address: City-St-Zip:	T () C CULVER, CLUAD 1629 NE SUNVIE JENSEN BEACH	EW TERR.	
Title: Name: Address: City-St-Zip:	() [elete	Title: Name: Address: City-St-Zip:	S () C MASTERSON, M 102 SW CARTER PORT ST. LUCIE	R AVE	

I hereby certify that the information supplied with this filing does not qualify for the 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 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 A. MAHOOD PRES 03/16/2004