## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## **DOCUMENT # P04000001285**

1. Entity Name

TLC CLEANING & PAINT SERVICES, INCORPORATED



FILED Apr 18, 2005 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

604 WEST WHEELER RD. SEFFNER, FL 33584 604 WEST WHEELER RD. SEFFNER, FL 33584



04122005

No Chg-P

CR2E034 (10/03)

FEI Number
 20-0478386

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

1	<ol><li>Name and Address</li></ol>	of Current Registered Agent

LAWSON, MONICA Z 2403 STATE ST. TAMPA, FL 33609

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	named entity submits this statement for the prions of registered agent.	urpose of changing its registered offi	ce or r	egistered agent, or b	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, lypeg or printed name of registered agent and little if	applicable (NOTE Registered Agent	signature	required when reinstating)	DATE
	Signature, types or private transfer or registered again and mas a	applicable (1501), http://doi.org/1011	a g · u.u.c	radaros wier orientasing	P-1152
	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00	<ol> <li>Election Campaign Financing Trust Fund Contribution.</li> </ol>		\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS			<del></del>
TITLE NAME STREET ADDRESS CITY-SI-ZIP	PD LOVELY, ARTHUR L 604 WEST WHEELER RD. SEFFNER, FL 33584				Unimous1346) 04/18/05-80128-005 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD LOVELY, TERRY C 604 WEST WHEELER RD. SEFFNER, FL 33584	***			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					<del>.</del>
TITLE NAME STREET ADDRESS CITY ST. 7IB					

12. I hereby certify that the information supplied with this filling 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.

AME OF SIGNING OFFICER OF DIRECTOR