## **2005 FOR PROFIT CORPORATION**

## ANNUAL REPORT

## DOCUMENT # P04000008010

XPERT GUTTER CLEANING AND PRESSURE WASHING INC.



50063373

**FILED** 

Aug 25, 2005 8:00 am Secretary of State

08-25-2005 90003 028 \*\*\*150.00

Principal Place of Business 2616 UMBRELLA TREE DRIVE FDGFWATER, FL 32141 Mailing Address

2616 UMBRELLA TREE DRIVE EDGEWATER EL 32141

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2. Principal Place of Business 3. Mailing Address 26/6-Um Business 20/6 Um Business			alle Tr. n					
Suite, Apt. #, etc.  Suite, Apt. #, etc.			ere i resu	07012005	Chg-P	CR2E03	4 (10/03)	=
Sity & State Edgewater F1. Edgewater, F			El	4. FEI Number	57949	00	<u> </u>	olied For Applicable
32/41 USA 32/41 U			Country USA		of Status Desired		8.75 Add ee Required	itional I
	6. Name and Address of Current R	Name	7. Name and Address of New Registered Agent Name					
CHARBONNIER, CHARLES E 2616 UMBRELLA TREE DRIVE EDGEWATER, FL 32141				Street Address (P.O. Box Number is Not Acceptable)				
Same and the same a			City			FL	Zip Code	
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, typed or printed name of registered agent and little it applicable INOTE. Registered Agent signature required when reinstating)  OATE								
FILE NOW!!! FEE IS \$150.00  Due by September 7, 2005  9. Election Campaign Finance Trust Fund Contribution.				\$5.00 May Be Added to Fees	In accordance corporation did			
10.	OFFICERS AND DIRECTORS 11.			ADDITIONS,	CHANGES TO OFF	ICERS AND	DIRECTORS	3 IN 11
NAME STREET ADDRESS CITY-ST-ZIP	P% CHARBONNIER, CHARLES E 2616 UMBRELLA TREE DRIVE EDGEWATER, FL 32141	Coletc	NAME STREET ADDRESS CITY-ST-ZIP				Change	Addition
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12. Thereby 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 gibby like empowered.

SIGNATURE:

in CHADIOSE, Charbonnier