

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

APPROVED  
AND  
FILED  
9/6/2005-90135-002 \$150.00-\$150.00


05 OCT -5 PM 2:51

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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08252005 Chg-P CR2E034 (10/03)

<b>DOCUMENT # P04000012269</b>					
1. Entity Name <b>FIRST QUALITY CLEANING SERVICE, INC.</b>					
Principal Place of Business <b>261 LAKE BREEZE CIR LAKE MARY, FL 32746</b>			Mailing Address <b>261 LAKE BREEZE CIR LAKE MARY, FL 32746</b>		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number <b>72-1578408</b>	Applied For <input type="checkbox"/> Not Applicable <input type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent <b>VELMONTE, BENJAMIN 283 CRANES ROOST BLVD STE 111 ALTMONTE SPRINGS, FL 32701</b>			7. Name and Address of New Registered Agent Name <b>Nelson Herrera</b> Street Address (P.O. Box Number is Not Acceptable) <b>261 Lake Breeze Circle</b> City <b>Lake Mary, FL</b> Zip Code <b>32746</b>		
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 <b>Nelson Herrera</b> (NOTE: Registered Agent signature required when re-registering) DATE					
<b>FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	PD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	HERRERA, NELSON		NAME		
STREET ADDRESS	281 LAKE BREEZE CIR		STREET ADDRESS		
CITY-ST-ZIP	LAKE MARY, FL 32746		CITY-ST-ZIP		
TITLE	VD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	HERNANDEZ, HILDA		NAME		
STREET ADDRESS	261 LAKE BREEZE CIR		STREET ADDRESS		
CITY-ST-ZIP	LAKE MARY, FL 32746		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			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 another line empowered.					
SIGNATURE: <b>Nelson Herrera</b> (NOTE: Registered Agent signature required when re-registering) DATE <b>K. Eckel OCT 05 2005</b> Daytime Phone #					