

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000013597

FILED
May 03, 2006
Secretary of State

Entity Name: STRIPES BUILDING MAINTENANCE, INC.

Current Principal Place of Business:

11266 W. HILLSBOROUGH AVENUE
SUITE 246
TAMPA, FL 33635

New Principal Place of Business:

P.O. BOX 135
OLDSMAR, FL 34677

Current Mailing Address:

11266 W. HILLSBOROUGH AVENUE
SUITE 246
TAMPA, FL 33635

New Mailing Address:

P.O. BOX 135
OLDSMAR, FL 34677

FEI Number: 20-0629549

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HAMBLE, KATHY
11266 W. HILLSBOROUGH AVENUE
SUITE 246
TAMPA, FL 33635 US

Name and Address of New Registered Agent:

HAMBLE, KATHY
611 BAYVIEW BLVD.
OLDSMAR, FL 34677 US

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: KATHY HAMBLE

05/03/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HAMBLE, KATHY
Address: 11266 W. HILLSBOROUGH AVE.
City-St-Zip: TAMPA, FL 33635

Title: D () Delete
Name: HAMBLE, NATHAN
Address: 11266 W. HILLSBOROUGH AVE.
City-St-Zip: TAMPA, FL 33635

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: HAMBLE, KATHY
Address: P.O. BOX 135
City-St-Zip: OLDSMAR, FL 34677

Title: D (X) Change () Addition
Name: HAMBLE, NATHAN
Address: P.O. BOX 135
City-St-Zip: OLDSMAR, FL 34677

I hereby certify that the information supplied with this filing does not qualify for the 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: KATHY HAMBLE

D

05/03/2006

Electronic Signature of Signing Officer or Director

Date