

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 14, 2007 8:00 am
Secretary of State

05-14-2007 90080 005 ***150.00

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1. Entity Name

SCRUBBS QUALITY CLEANING, INC.



Principal Place of Business

102 E NEW HAVEN AVE
MELBOURNE, FL 32901

Mailing Address

102 E NEW HAVEN AVE
MELBOURNE, FL 32901



04272007 No Chg-P CR2E034 (11/05)

4. FEI Number

80-0095748

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

MCCALMONT, ANITA J

~~171 CROWN AVE NE~~

~~PALEMBAY, FL 32907~~

714 Dryden Circle
Cocoa, FL 32926

**DO NOT WRITE
IN THIS SPACE**

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

Anita McCalmont

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/28/07

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	PTD
NAME	MCCALMONT, ANITA J
STREET ADDRESS	171 CROWN AVE NE 714 Dryden Circle
CITY-ST-ZIP	MELBOURNE, FL 32907 Cocoa, FL 32926

TITLE	
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STREET ADDRESS	
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**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

SIGNATURE:

Anita McCalmont

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/07

Date

(321) 271-1191

Daytime Phone #