2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000030820

Entity Name: JC JANE'S CLEANING SERVICE, CORP

FILED Apr 19, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4850 CASON COVE DR 5041 PARK CENTRAL DR APT 101 **APT 1911**

ORLANDO, FL 32811 ORLANDO, FL 32839

Current Mailing Address: New Mailing Address:

4850 CASON COVE DR 5041 PARK CENTRAL DR **APT 101 APT 1911** ORLANDO, FL 32811 US ORLANDO, FL 32839 US

FEI Number: 20-0751544 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

RIVERA, CRISTINA ACCOUNT BOOKKEEPING CORP 1516 E COLONIAL DR 5950 LAKEHURST DR 107 246

ORLANDO, FL 32803 US ORLANDO, FL 32819 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: CAROLINE LARSON 04/19/2005

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: () Delete DA SILVA SOARES, REGANE A Name: 4850 CASON COVE DR APT 101 Address: City-St-Zip: ORLANDO, FL 32811 US

() Delete Title: DE OLIVEIRA SOARES, ARMANDO C Name:

4850 CASON COVE DR APT 101 Address: ORLANDO, FL 32811 US City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change () Addition DA SILVA SOARES, REGANE A Name: 5041 PARK CENTRAL DR APT 1911 Address:

City-St-Zip: ORLANDO, FL 32839 US

City-St-Zip:

Title: (X) Change () Addition DE OLIVEIRA SOARES, ARMANDO C Name: Address: 5041 PARK CENTRAL DR APT 1911 ORLANDO, FL 32839 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: REGANE SOARES DP 04/19/2005