2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000039338

Entity Name: P & H CLEANING SERVICE INC

FILED Mar 13, 2005 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

9195 SW 147TH AVE., SUITE 3133 14175 SW 87TH STREET MIAMI, FL 33196

STE C107

MIAMI, FL 33183

Current Mailing Address: New Mailing Address:

9195 SW 147TH AVE., SUITE 3133 14175 SW 87TH STREET

MIAMI, FL 33196 STE C107

MIAMI, FL 33183

FEI Number: 16-1693912 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:

NORENA, HERNAN NORENA, HERNAN 9195 SW 147TH AVE., SUITE 3133 14175 SW 87TH STREET MIAMI, FL 33196 STE C107

MIAMI, FL 33183 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: 03/13/2005

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: (X) Change () Addition () Delete Title:

NORENA, HERNAN NORENA, HERNAN Name: Name: 9195 SW 147TH AVE., SUITE 3133 14175 SW 87TH STREET STE C107 Address: Address:

City-St-Zip: MIAMI, FL 33196 City-St-Zip: MIAMI, FL 33183

Title: () Delete Title: DV (X) Change () Addition NORENA, PATRICIA Name: Name: NORENA, PATRICIA

9195 SW 147TH AVE., SUITE 3133 Address: 14175 SW 87TH STREET STE C107 Address:

MIAMI, FL 33196 MIAMI, FL 33183 City-St-Zip: City-St-Zip:

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: HERNAN NORENA DP 03/13/2005

Electronic Signature of Signing Officer or Director

Date