## \*2006 FOR PROFIT CORPORATION

## Mar 30, 2006 08:00 AM **ANNUAL REPORT Secretary of State** DOCUMENT # P04000045537 J.M. GENERAL CLEANING. INC Principal Place of Business Mailing Address **47 ANDROS ROAD 47 ANDROS ROAD** PALM SPRINGS, FL 33461 PALM SPRINGS, FL 33461 No Chg-P CR2E034 (11/05) 01242006 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 73-1697701 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MERA, JORGE F DO NOT WRITE 47 ANDROS ROAD PALM SPRING, FL 33461 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 (NOTE: Registered Agent signature required when reinstating) Signature, wheel or printed name of retristered agent and fills if appricable. 8. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE MERA, GLENDA H NAME STREET ADDRESS 47 ANDROS ROAD PALM SPRING, FL 33461 CITY -ST-ZIP 7)T1E NAME ीर्वा व व व्यक्ति स्तरि STREET ADDRESS 3471578 BRUGS BB. (50.6) CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ACCRESS CITY-SY-ZIP NAME STREET ADDRESS

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 direction 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 changed, or on an attachment with an appreciate in the empowered.

URE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

124/06 501-431-319

FILED