

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P04000047096

FILED
Jun 15, 2006
Secretary of State

Entity Name: MILLMAN REMODELING & CONSTRUCTION CLEANING, INC.

Current Principal Place of Business:

1017 JENNIFER TERRACE
PORT SAINT LUCIE, FL 349531838 US

New Principal Place of Business:

650 SOUTH EAST THANKSGIVING AVE
PORT SAINT LUCIE, FL 34984 US

Current Mailing Address:

1017 JENNIFER TERRACE
PORT SAINT LUCIE, FL 349531838 US

New Mailing Address:

650 SOUTH EAST THANKSGIVING AVE
PORT SAINT LUCIE, FL 34984 US

FEI Number: 20-0868500

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILLMAN, HARRIETT B
1017 JENNIFER TERRACE
PORT SAINT LUCIE, FL 349531838 US

Name and Address of New Registered Agent:

MILLMAN, HARRIETT B
650 SOUTH EAST THANKSGIVING AVE
PORT SAINT LUCIE, FL 34984 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: LISA CASTELLANO

06/15/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DPS () Delete
Name: MILLMAN, HARRIETT B
Address: 1017 JENNIFER TERRACE
City-St-Zip: PORT SAINT LUCIE, FL 349531838 US

Title: DVT () Delete
Name: MILLMAN, MICHAEL
Address: 1017 JENNIFER TERRACE
City-St-Zip: PORT SAINT LUCIE, FL 349531838 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change () Addition
Name: MILLMAN, HARRIETT B
Address: 650 SOUTH EAST THANKSGIVING AVE
City-St-Zip: PORT SAINT LUCIE, FL 34984 US

Title: DVT (X) Change () Addition
Name: CASTELLANO, LISA M
Address: 650 THANKSGIVING AVE
City-St-Zip: PORT SAINT LUCIE, FL 34984 US

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: LISA CASTELLANO

DVT

06/15/2006

Electronic Signature of Signing Officer or Director

Date