2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2009
Secretary of State

DOCUMENT# P04000091677

Entity Name: ADA ROSSELL'S CLEANING SERVICE, INC.

Current Principal Place of Business:

885 EVERGLADES BLVD. S E
NAPLES, FL 34117 US

New Principal Place of Business:

4300 PINE RIDGE RD.
NAPLES, FL 34119 US

Current Mailing Address:

P.O.BOX 990812
NAPLES, FL 34116 US

New Mailing Address:

P.O.BOX 990812
NAPLES, FL 34119 US

FEI Number: 84-1650114 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DIAZ, ADA
9167 HARDING AVE
SURFSIDE, FL 34154 US

Name and Address of New Registered Agent:

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: _____
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: ROSSELL, ADA
Address: 2240 39TH ST SW
City-St-Zip: NAPLES, FL 34117 US

Title: VP ( ) Delete
Name: MEJIA, WILSON
Address: 2240 39TH ST SW
City-St-Zip: NAPLES, FL 34117 US

Title: VP ( ) Delete
Name: ESPINAL, MARIA S
Address: 1247 SOUTH ALHAMBRA CIRCLE
City-St-Zip: NAPLES, FL 34113

Title: VP ( ) Delete
Name: OBANDO, LOURDES
Address: 2171-43 ST S W # 54
City-St-Zip: NAPLES, FL 34116

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: ROSSELL, ADA B
Address: 4300 PINE RIDGE RD
City-St-Zip: NAPLES, FL 34119 US

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: ADA B ROSSELL P 04/16/2009
Electronic Signature of Signing Officer or Director Date