2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000096574

1. Entity Name ASHLEY'S XTREME CLEANING SERVICES, INC.

FILED May 12, 2006 08:00 AM **Secretary of State**

Principal Place of Business

11813 BALSAM DRIVE

ROYAL PALM BEACH, FL 33411

Mailing Address

11813 BALSAM DRIVE

ROYAL PALM BEACH, FL 33411



05102006

No Chg-P

CR2E034 (11/05)

4. FEI Number 20-1289977

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

DEMPS, HELEN J 11813 BALSAM DRIVE ROYAL PALM BEACH, FL 33411

DO NOT WRITE IN THIS SPACE

| | above named entity submits this statement for the obligations of registered agent. | e purpose of changing its registered office or registered agent, or | both, in the State of Florida. I am familiar with, and accept |
|--|---|---|--|
| SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when rehistating) DATE | | | |
| | FILE NOW!!! FEE IS \$150.00 Due by September 6, 2006 | 9. Election Campaign Financing \$5.00 May 8e Trust Fund Contribution. Added to Fees | In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. |
| 10. | OFFICERS AND DIRECTORS | | |
| TITLE NAME | P DEMPS, HELEN J | | |

STREET ADDRESS 11813 BALSAM DRIVE CITY-ST-ZIP ROYAL PALM BEACH, FL 33411 TITLE NAME BALL, WILLIE STREET ADDRESS 11813 BALSAM DRIVE City-St-Zip ROYAL PALM BEACH, FL 33411 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

U00000564993 05/20/06-80099-015 150.00

DO NOT WRITE IN THIS SPACE

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 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 in Block 10 or Block 11 if of the corporation or the rece changed, or on an attachmen

NAME STREET ADDRESS CITY-ST-ZIP TITLE

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CHY-ST-ZIP