## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000100580

Entity Name: EXCELLENT CLEANING OF COLLIER INC

**FILED** Apr 29, 2005 Secretary of State

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

4511 CORAL PALMS LN 4733 22ND ST S.W.

LEHIGH ACRES, FL 33971 #5

NAPLES, FL 34116

**New Mailing Address: Current Mailing Address:** 

4511 CORAL PALMS LN 4733 22ND ST S.W.

LEHIGH ACRES, FL 33971 NAPLES, FL 34116

FEI Number: 20-1325755 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:

PAULA, ELIAS O TAX HOUSE CORPORATIN 1261 E SAMPLE ROAD 4511 CORAL PALMS LN POMPANO BEACH, FL 33064 US

NAPLES, FL 34116 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: TAX HOUSE CORPORATION 04/29/2005

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition PAULA, ELIAS O PAULA, ELIAS O Name: Name: 4511 CORAL PALMS # 5 4733 22ND ST S.W. Address: Address: City-St-Zip: NAPLES, FL 34116 City-St-Zip: LEHIGH ACRES, FL 33971

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

Name: PAULA, EDNEA M Name: PAULA, EDNEA M 4511 CORAL PALMS LN # 5 4733 22ND ST S.W. Address: Address: NAPLES, FL 34116 LEHIGH ACRES, FL 33971 City-St-Zip: City-St-Zip:

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

CLAUDIO, JOSE Name: CLAUDIO, JOSE Name: 5210 HENINGWAY CIR., #2301 4733 22ND ST S.W. Address: Address: City-St-Zip: NAPLES, FL 34116 City-St-Zip: LEHIGH ACRES, FL 33971

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.

VΡ SIGNATURE: EDNEIA M. PAULA 04/29/2005