

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 11, 2005 8:00 am
Secretary of State

08-11-2005 90002 042 ***158.75

DOCUMENT # P04000110055

1. Entity Name
JAMI AND JASON'S CLEANING SERVICE'S INC



Principal Place of Business
**4270 GOLFERS CIRCLE EAST
PALM BEACH GARDENS, FL 33410**

Mailing Address
**4270 GOLFERS CIRCLE EAST
PALM BEACH GARDENS, FL 33410**

50660959



2. Principal Place of Business
4931 Wedgewood Way
Suite, Apt. #, etc.

3. Mailing Address
P.O. Box 221183
Suite, Apt. #, etc.

08082005 Chg-P CR2E034 (10/03)

City & State
West Palm Beach, Florida
Zip
33417
Country
Palm Beach

City & State
West Palm Beach, Florida
Zip
33422
Country
Palm Beach

4. FEI Number
20-1412411
Applied For
☐ Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**GUERRA, SUYAPA J
4270 GOLFERS CIRCLE EAST
PALM BEACH GARDENS, FL 33410**

7. Name and Address of New Registered Agent

Name
Suyapa J. Guerra
Street Address (P.O. Box Number is Not Acceptable)
4931 Wedgewood Way Apt 7
City
West Palm Beach **FL** Zip Code
33417

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 *[Signature]* **Suyapa J. Guerra, President** **08/08/2005**
(NOTE: Registered Agent signature required when transferring) DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 7, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
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	PT	<input type="checkbox"/> Delete
NAME	GUERRA, SUYAPA J	
STREET ADDRESS	4270 GOLFERS CIRCLE EAST	
CITY-ST-ZIP	PALM BEACH GARDENS, FL 33410	
TITLE	S	<input checked="" type="checkbox"/> Delete
NAME	GUERRA, ROSSET D	
STREET ADDRESS	4270 GOLFERS CIRCLE EAST	
CITY-ST-ZIP	PALM BEACH GARDENS, FL 33410	
TITLE	V	<input checked="" type="checkbox"/> Delete
NAME	OQUENDO, MARCELINO	
STREET ADDRESS	881 CARMELLIA DR.	
CITY-ST-ZIP	ROYAL PALM BEACH, FL 33411	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	VELOSO MANUEL	
STREET ADDRESS	4931 WEDGEWOOD WAY, Apt 7	
CITY-ST-ZIP	WEST PALM BEACH, FL 33417	
TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MENDEZ LAZARO	
STREET ADDRESS	4931 WEDGEWOOD WAY, APT 7	
CITY-ST-ZIP	WEST PALM BEACH, FL 33417	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify 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 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature] **Suyapa J. Guerra** **B-B-05** **(561) 667-9860**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT
50060959

P.O. Box 221183
West Palm Beach, FL 33422
August 8, 2005

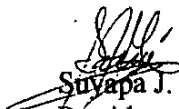
Florida Department of State
Division of Corporations
PO BOX 6327
TALLAHASSEE, FL 32314

RE: JAMI AND JASON'S CLEANING SERVICE'S, INC.
P04000110055

This is a request to have the annual report *late fee* waived. As indicated on the submitted annual report, I did not receive the notice to renew in accordance with s. 607.193(2)(b) F.S.

Please review my uniform business report once again, and inform me if my request to waive the late fee is granted.

Sincerely,


Suyapa J. Guerra
President