

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2005 8:00 am
Secretary of State

04-20-2005 90357 035 ***150.00

50041066

DOCUMENT # P04000111604			
1. Entity Name LARIA OFFICE MAINTENANCE, INC.			
Principal Place of Business 8711 SW 97TH AVENUE SUITE 138 MIAMI, FL 33173		Mailing Address 8711 SW 97TH AVENUE SUITE 138 MIAMI, FL 33173	
2. Principal Place of Business 9001 SW 77 AVE		3. Mailing Address 9001 SW 77 AVE	
Suite, Apt. #, etc. C109		Suite, Apt. #, etc. C109	
City & State MIAMI FL		City & State MIAMI FL	
Zip 33156	Country USA	Zip 33156	Country USA
4. FEI Number 14-1912764		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent LARIA, JOSE L. 8711 SW 97TH AVENUE SUITE 138 MIAMI, FL 33173		7. Name and Address of New Registered Agent Name LARIA, JOSE L. Street Address (P.O. Box Number is Not Acceptable) 9001 SW 77 AVE APT C109 City MIAMI FL Zip Code 33156	
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 JOSE L. LARIA		DATE 04-16-05	
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P,S LARIA, JOSE L. 8711 SW 97TH AVENUE MIAMI, FL 33173 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P,S LARIA, JOSE L. 9001 SW 77 AVE APT C109 MIAMI FL 33156 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LARIA, JOSE L. 8711 SW 97TH AVENUE MIAMI, FL 33173 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LARIA, JOSE L. 9001 SW 77 AVE APT C109 MIAMI FL 33156 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP,T PEREZ, MARTHA 8711 SW 97TH AVENUE MIAMI, FL 33173 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP,T PEREZ, MARTHA 9001 SW 77 AVE APT C109 MIAMI FL 33156 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PEREZ, MARTHA 8711 SW 97TH AVENUE MIAMI, FL 33173 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PEREZ, MARTHA 9001 SW 77 AVE APT C109 MIAMI FL 33156 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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: JOSE L. LARIA		DATE 04/16/05	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Daytime Phone # 305 630 3681	