## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000112223

Entity Name: BARRE'S CLEANING SERVICE, INC.

FILED Apr 22, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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4216 OVERLOOK DRIVE NE P.O. BOX 60298 PALM BAY, FL 32905 PALM BAY, FL 32906

Current Mailing Address: New Mailing Address:

4216 OVERLOOK DRIVE NE P.O. BOX 60298 PALM BAY, FL 32905 PALM BAY, FL 32906

FEI Number: 20-1440552 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:

BARRE, LUZ M
4216 OVERLOOK DRIVE NE
PALM BAY, FL 32905 US

BARRE, LUZ M
P.O. BOX 60298
PALM BAY, FL 32906 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: 04/22/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 BARRE, LUZ M
 Name:
 BARRE, LUZ M

 Address:
 4216 OVERLOOK DRIVE NE
 Address:
 P.O. BOX 60298

 City-St-Zip:
 PALM BAY, FL 32905
 City-St-Zip:
 PALM BAY, FL 32906

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

 Name:
 SANTOS, KARIME
 Name:
 SANTOS, KARIME

 Address:
 501 RADDICK STREET
 Address:
 501 REDDICK STREET

 City-St-Zip:
 MELBOURNE, FL 32901
 City-St-Zip:
 MELBOURNE, FL 32901

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

 Name:
 SANTOS, RUBEN
 Name:
 SANTOS, RUBEN

 Address:
 4216 OVERLOOK DRIVE NE
 Address:
 P.O. BOX 60298

 City-St-Zip:
 PALM BAY, FL 32905
 City-St-Zip:
 PALM BAY, FL 32906

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.

SIGNATURE: LUZ M. BARRE D 04/22/2005