


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 26, 2007 8:00 am
Secretary of State

03-26-2007 90071 010 ***150.00

DOCUMENT # P04000121792 1. Entity Name SLV'S CLEANING SERVICES, INC.			
Principal Place of Business 2011 RIVER REACH DR APT 257 NAPLES, FL 34104		Mailing Address 2011 RIVER REACH DR APT 257 NAPLES, FL 34104	
2. Principal Place of Business - No P.O. Box # 2716 21st St West		3. Mailing Address 2716 21st St West	
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 	
City & State Lehigh Acres, FL		City & State Lehigh Acres, FL	
Zip 33971	Country 	Zip 33971	Country
4. FEI Number 75-3165817		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent A1A REGISTERED AGENT INC. 92 SADBERRY RD. QUINCY, FL 32351		7. Name and Address of New Registered Agent Name Shelly Higuera Street Address (P.O. Box Number is Not Acceptable) 2716 21st Street West City Lehigh Acres FL Zip Code 33971	
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 <u><i>Shelly Higuera</i></u> (NOTE: Registered Agent signature required when re-registering) DATE <u>3/12/07</u>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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 PD HIGUERA, SHELLY L 2290 ARBOUR WAL CIRCLE, #1315 NAPLES, FL 34109	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP 2716 21st St W Lehigh Acres, FL 33971	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP D HIGUERA, CARLOS 2011 RIVER REACH DR APT 257 NAPLES, FL 34104	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP 2716 21st St W Lehigh Acres, FL 33971	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <u><i>Shelly Higuera</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<u>3/12/07 239-877-9572</u> <small>Date Daytime Phone #</small>	