

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000121792

FILED
Mar 23, 2009
Secretary of State

Entity Name: SLV'S CLEANING SERVICES, INC.

Current Principal Place of Business:

2334 ARBOUR WALK CIR
UNIT 1016
NAPLES, FL 34109

New Principal Place of Business:

4815 WHISTLERS GREEN CIRCLE
UNIT 7
NAPLES, FL 34116

Current Mailing Address:

2334 ARBOUR WALK CIRCLE
UNIT 1016
NAPLES, FL 34109

New Mailing Address:

4815 WHISTLERS GREEN CIRCLE
UNIT 7
NAPLES, FL 34116

FEI Number: 75-3165817

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VARNEY, SHELLY
2334 ARBOUR WALK CIRCLE
UNIT 1016
NAPLES, FL 34109 US

Name and Address of New Registered Agent:

VARNEY, SHELLY
4815 WHISTLERS GREEN CIRCLE
UNIT 7
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:

03/23/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: VARNEY, SHELLY L
Address: 2334 ARBOUR WALK CIRCLE UNIT 1016
City-St-Zip: NAPLES, FL 34109

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: VARNEY, SHELLY L
Address: 4815 WHISTLERS GREEN CIRCLE #7
City-St-Zip: NAPLES, FL 34116

Title: DIR () Change (X) Addition
Name: ANGARITA, YENIFER
Address: 4800 WHISTLERS GREEN CIRCLE #7
City-St-Zip: NAPLES, FL 34116

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: SHELLY VARNEY

PD

03/23/2009

Electronic Signature of Signing Officer or Director

Date