## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000161718

Entity Name: HEAVENSCENT CLEANING & MAINTENANCE CORP.

FILED Jul 06, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

9609 SW 138 AVE 12350 SW 132 CT#110 MIAMI, FL 33186 MIAMI, FL 33186

**Current Mailing Address: New Mailing Address:** 

12350 SW 132 CT #110 9609 SW 138 AVE MIAMI, FL 33186 MIAMI, FL 33186

FEI Number: 20-2089448 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

MACHIN, DORIS MACHIN, DORIS 9609 SW 138 AVE 22618 SW 94 PATH US US MIAMI, FL 33186 MIAMI, FL 33190

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: 07/06/2006

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:** 

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change ( ) Addition MACHIN, DORIS MACHIN, DORIS Name: Name: 9609 SW 138 AVE 22618 SW 94 PATH Address: Address:

City-St-Zip: MIAMI, FL 33186 City-St-Zip: MIAMI, FL 33190

Title: Title: DVP (X) Change ( ) Addition () Delete Name: DELGADO, ROSA TERESA Name: CARRASQUILLO, MADELINE 9411 SW 227 LN 4510 SW 146 CT Address: Address: MIAMI, FL 33176 MIAMI, FL 33190

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

City-St-Zip:

CARRASQUILLO, MADELINE MARIN, IDANIA Name: Name:

5201 NW 7 ST 12254 SW 148 TERRACE Address: Address: City-St-Zip: MIAMI, FL 33126 City-St-Zip: MIAMI, FL 33186

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

BRITO, TANIA BRITO, TANIA Name: Name: Address: 15364 SW 32 TERR Address: 2237 PORTOFINO AVE City-St-Zip: City-St-Zip: MIAMI, FL 33185 MIAMI, FL 33033

I hereby certify that the information supplied with this filing does not qualify for the 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: DORIS MACHIN DP 07/06/2006