

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Aug 01, 2006 8:00 am
Secretary of State

07-05-2006 90002 025 ***150.00

DOCUMENT # P04000166069

1. Entity Name
MASTER CLEANING SERV. INC.



Principal Place of Business

**939 NW 81 ST #C-336
MIAMI, FL 33150**

Mailing Address

**939 NW 81 ST #C-336
MIAMI, FL 33150**

66022528



06282008 No Chg-P CR2ED34 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-2277081	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**SAM, RENE A
939 NW 81 ST #C-336
MIAMI, FL 33150**

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$350.00
Due by September 6, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	DPT
NAME	SAM, RENE A
STREET ADDRESS	939 NW 81 ST #C-336
CITY-ST-ZIP	MIAMI, FL 33150
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR

07-10-2006

Date

305-527 0774

Daytime Phone #

ATTACHMENT

660 22528

Miami, Florida June 27, 2006

FLORIDA DEPARTMENT OF STATE

Glenda E Hood

Secretary of State

SUBJECT: MASTER CLEANING SERV. INC. Number: P 04000166069
FEI Number : 20-2277081.

This latter is in regards of the Annual Report that was presented and paid during the time given (it was sent on April 28,2005) . Subsequently to this date, the Annual Report was returned because the person responsible it shipment to the mistaken address.

Due to what was jus mentioned and our concerned about send thing you the Annual Report well written and filled out, we ask to please avoid giving us any additional late fee of \$ 400 because the payment of \$ 150.00 was sent during time limit given.

It was not negligence , but is mistaken in address.

We hope that this information is useful to you in solving this matter.

Thank you,


SAM BENE