

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000014171

FILED  
Apr 04, 2006  
Secretary of State

Entity Name: DIRECT JANITORIAL SERVICE, INC.

## Current Principal Place of Business:

1261 E SAMPLE ROAD STE 1028  
POMPANO BEACH, FL 33064

## New Principal Place of Business:

858 SW MUNJACK COVE  
PORT SAINT LUCIE, FL 34986

## Current Mailing Address:

1261 E SAMPLE ROAD STE 1028  
POMPANO BEACH, FL 33064

## New Mailing Address:

858 SW MUNJACK COVE  
PORT SAINT LUCIE, FL 34986

FEI Number: 20-2241469

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

TAX HOUSE CORPORATION  
1261 E SAMPLE ROAD  
POMPANO BEACH, FL 33064 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: MILAGROS, FERNANDO  
Address: 1261 E SAMPLE ROAD STE 444  
City-St-Zip: POMPANO BEACH, FL 33064

Title: D ( ) Delete  
Name: CARDOSO, VANESSA  
Address: 1261 E SAMPLE ROAD STE 444  
City-St-Zip: POMPANO BEACH, FL 33064

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: CRUZ, MARCELO  
Address: 858 SW MUNJACK COVE  
City-St-Zip: PORT SAINT LUCIE, FL 34986

Title: VPD (X) Change ( ) Addition  
Name: DE SOUZA, VERUSKA  
Address: 858 SW MUNJACK COVE  
City-St-Zip: PORT SAINT LUCIE, FL 34986

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: MARCELO CRUZ

PD

04/04/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date