

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Feb 09, 2007 08:00 AM
Secretary of State**

DOCUMENT # P05000020258

1. Entity Name
SUN CITY AFFORDABLE CLEANING SERVICES, INC.



Principal Place of Business

**1631 ORACLE DRIVE
RUSKIN, FL 33570**

Mailing Address

**1631 ORACLE DRIVE
RUSKIN, FL 33570**

DO NOT WRITE IN THIS SPACE



02052007 No Chg-P CR2E034 (11/05)

4. FEI Number
20-2301256

Applied For
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**KULA, BEVERLY J
1631 ORACLE DRIVE
RUSKIN, FL 33570**

**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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

Feb 7, 2007

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

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

**U00000628822
02/16/07-80032-012 150.00**

10. OFFICERS AND DIRECTORS

TITLE	DPT
NAME	KULA, BEVERLY J
STREET ADDRESS	1631 ORACLE DRIVE
CITY-ST-ZIP	RUSKIN, FL 33570
TITLE	DVPS
NAME	KULA, JOHN C
STREET ADDRESS	1631 ORACLE DRIVE
CITY-ST-ZIP	RUSKIN, FL 33570
TITLE	T
NAME	KULA, SCOTT
STREET ADDRESS	1631 ORACLE DRIVE
CITY-ST-ZIP	RUSKIN, FL 33570
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:

Beverly J Kula
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Feb 7, 2007

Date

Daytime Phone #

813 633 3290