## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000020315

11556 TERN COURT

WELLINGTON, FL 33414

Address: City-St-Zip: FILED Apr 27, 2009 Secretary of State

				,	
Entity Nar	ne: G&G CLE	ANING SERVICE OF WPB, IN	IC.		
Current Principal Place of Business:			New Principal Place	of Business:	
11556 TER WELLING	RN COURT FON, FL 33414	1			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
11556 TER WELLING	RN COURT FON, FL 33414	1			
FEI Number:	16-1716724	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145 US			1109 SOUTH CONGR	YEEND, CASTANEDA & FLYNN, LLP 1109 SOUTH CONGRESS AVE WEST PALM BEACH, FL 33406 US	
The above in the State		ubmits this statement for the p	ourpose of changing its registere	ed office or registered agent, or both,	
SIGNATURE: CARLOS CASTANEDA				04/27/2009	
Electronic Signature of Registered Agent			ent	Date	
Election Can	npaign Financing	Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PTD () RAMOS, GUILLI 11556 TERN CO WELLINGTON,	DURT	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VD () RAMOS, GLADY 11556 TERN CO WELLINGTON,	DURT	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	SD () RAMOS, BILLY	Delete	Title: Name:	( ) Change ( ) Addition	

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.

Address:

City-St-Zip:

SIGNATURE: GUILLERMO RAMOS P 04/27/2009