

2006 FOR PROFIT CORPORATION ANNUAL REPORT

04-13-2006 90297 044 ***150.00
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SECRETARY OF STATE
TALLAHASSEE, FL 32314
50011531



04062006 Chg-P CR2E034 (11/05)

DOCUMENT # P05000043221 1. Entity Name SIERRA CLEANING SERVICES, INC.					
Principal Place of Business 8234 SUMPTER CT. ORLANDO, FL 32822			Mailing Address 8234 SUMPTER CT. ORLANDO, FL 32822		
2. Principal Place of Business 3480 Morningside Dr. Suite, Apt. #, etc.		3. Mailing Address 3480 Morningside Dr. Suite, Apt. #, etc.			
City & State Kissimmee FL		City & State Kissimmee FL		4. FEI Number 06-1743230	
Zip 34744		Country Oceola		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent DIAZ, ARISTIDES J. 425 W. COLONIAL DR., STE. 203 ORLANDO, FL 32804			7. Name and Address of New Registered Agent Name Olga Arias-Sierra Street Address (P.O. Box Number is Not Acceptable) 3480 Morningside Dr. City KISS. FL Zip Code 34744		
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 Olga Arias-Sierra - President 4/8/06 (NOTE: Registered Agent signature required when reinstating)					
FILE NOW!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	D ☐ Delete	TITLE	☐ Change ☐ Addition		
NAME	ARIAS-SIERRA, OLGA	NAME			
STREET ADDRESS	8234 SUMPTER CT.	STREET ADDRESS			
CITY-ST-ZIP	ORLANDO, FL 32822	CITY-ST-ZIP			
TITLE	D ☐ Delete	TITLE	☐ Change ☐ Addition		
NAME	SIERRA, EDWIN O.	NAME			
STREET ADDRESS	8234 SUMPTER CT.	STREET ADDRESS			
CITY-ST-ZIP	ORLANDO, FL 32822	CITY-ST-ZIP			
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition		
NAME		NAME			
STREET ADDRESS		STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP			
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition		
NAME		NAME			
STREET ADDRESS		STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP			
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition		
NAME		NAME			
STREET ADDRESS		STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP			
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: Director Olga Arias-Sierra 4/8/06 4073441119 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					