
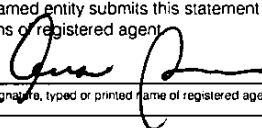
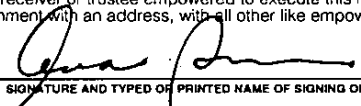


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 23, 2007 8:00 am
Secretary of State

03-23-2007 90005 009 ***150.00

DOCUMENT # P05000052913					
1. Entity Name L & J SPECIAL CLEANING, INC.					
Principal Place of Business 2876 PAYNES PRAIRIE CIRCLE KISSIMMEE, FL 34743 US			Mailing Address 2876 PAYNES PRAIRIE CIRCLE KISSIMMEE, FL 34743 US		
2. Principal Place of Business - No P.O. Box # 1201 E DONEGAN AVE.			3. Mailing Address		
Suite, Apt. #, etc. SUITE 1201			Suite, Apt. #, etc.		
City & State KISSIMMEE, FL			City & State		
Zip 34744-1948		Country U.S.A.		Zip 34744-1948	
Country U.S.A.		4. FEI Number 04-3811569			
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CRUZ, LAURA T 2876 PAYNES PRAIRIE CIRCLE KISSIMMEE, FL 34743			7. Name and Address of New Registered Agent Name: ANA J. SAVINON Street Address (P.O. Box Number is Not Acceptable): 2835 FLAMBOYAN STREET City: KISSIMMEE FL Zip Code: 34744-3824		
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:  ANA J. SAVINON, PRESIDENT 03/05/2007 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PST CRUZ, LAURA T 2876 PAYNES PRAIRIE CIRCLE KISSIMMEE, FL 34743 <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	P ANA J. SAVINON 2835 FLAMBOYAN STREET KISSIMMEE, FL 34744-3824 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	V FIDEL HERNANDEZ 11916 HATCHER CIRCLE ORLANDO, FL 32824 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	S LEOPOLDO E. REYES GOMEZ 2706 LUCAS LAKES LANE KISSIMMEE, FL 34744-5404 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	T PELEGRIN A. BORI 8203 DIAMOND COVE CIRCLE ORLANDO, FL 32836 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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:  ANA J. SAVINON 03/05/07 407-870-0505 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					