

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000075823

FILED
Sep 01, 2006
Secretary of State

Entity Name: KUTE CARE CLEANING CORPORATION

Current Principal Place of Business:

1963 CASSINGHAM CIRCLE
OCOEE, FL 34761 US

New Principal Place of Business:

516 HUNTINGTON PINES DR
OCOEE, FL 34761 US

Current Mailing Address:

1963 CASSINGHAM CIRCLE
OCOEE, FL 34761 US

New Mailing Address:

516 HUNTINGTON PINES DR
OCOEE, FL 34761 US

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ACCOUNT BOOKKEEPING CORP
5950 LAKEHURST DR
SUITE 246
ORLANDO, FL 32819 US

Name and Address of New Registered Agent:

LARSON, CAROLINE
8818 COMMODITY CIR
STE 40
ORLANDO, FL 32819 US

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: CAROLINE LARSON

09/01/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GODOI, CYNTIA V
Address: 9187 MONTEVELO DR
City-St-Zip: ORLANDO, FL 32818 US

Title: VP (X) Delete
Name: NETO, KEILA VALIM O
Address: 1963 CASSINGHAM CIRCLE
City-St-Zip: OCOEE, FL 34761 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GODOI, CYNTIA V
Address: 516 HUNTINGTON PINES DR
City-St-Zip: OCOEE, FL 34761 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: CINTIA GODOI

P

09/01/2006

Electronic Signature of Signing Officer or Director

Date