

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000078412

FILED
Apr 24, 2006
Secretary of State

Entity Name: FLORIDA DEATH & CRIME SCENE CLEANING, INC.

Current Principal Place of Business:

3815 GATOR BAY LANE
ST CLOUD, FL 34772

New Principal Place of Business:

3815 GATOR BAY LANE
ST CLOUD, FL 34772 US

Current Mailing Address:

3815 GATOR BAY LANE
ST CLOUD, FL 34772

New Mailing Address:

3815 GATOR BAY LANE
ST CLOUD, FL 34772 US

FEI Number: 20-3340023

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CARROLL, STEVEN L
2400 DENN JOHN LANE
KISSIMMEE, FL 34744 US

Name and Address of New Registered Agent:

CARROLL, STEVEN L P
2400 DENN JOHN LANE
KISSIMMEE, FL 34744 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: STEVEN L. CARROLL

04/24/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: LLERNA, ASBEL A
Address: 3815 GATOR BAY LANE
City-St-Zip: ST CLOUD, FL 34772

Title: D () Delete
Name: CARROLL, STEVEN L
Address: 2400 DENN JOHN LANE
City-St-Zip: KISSIMMEE, FL 34744

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: V (X) Change () Addition
Name: LLERENA, ASBEL A V
Address: 3815 GATOR BAY LANE
City-St-Zip: ST CLOUD, FL 34772 US

Title: P (X) Change () Addition
Name: CARROLL, STEVEN L
Address: 2400 DENN JOHN LANE
City-St-Zip: KISSIMMEE, FL 34744 US

Title: T () Change (X) Addition
Name: ACEVEDO, SILMARIE T
Address: 3815 GATOR BAY LANE
City-St-Zip: ST CLOUD, FL 34772 US

Title: S () Change (X) Addition
Name: CARROLL, JADE S
Address: 2400 DENN JOHN LANE
City-St-Zip: KISSIMMEE, FL 34744 US

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: SILMARIE ACEVEDO

T

04/24/2006

Electronic Signature of Signing Officer or Director

Date