

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000090464

FILED  
Sep 05, 2006  
Secretary of State

Entity Name: EDAN'S CLEANING SERVICES, INC.

## Current Principal Place of Business:

203 SW 85TH TERRACE  
SUITE 101  
PEMBROKE PINES, FL 33025

## New Principal Place of Business:

## Current Mailing Address:

203 SW 85TH TERRACE  
SUITE 101  
PEMBROKE PINES, FL 33025

## New Mailing Address:

203 SW 85TH TERRACE  
SUITE 101  
PEMBROKE PINES, FL 33025 US

FEI Number: 05-0548639

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

A1A REGISTERED AGENT INC.  
92 SADBERRY ROAD  
QUINCY, FL 32351 US

## Name and Address of New Registered Agent:

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:

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: MATHURIN, MARLENE  
Address: 203 SW 85 TERRACE #101  
City-St-Zip: PEMBROKE PINES, FL 33025

Title: VP ( ) Delete  
Name: FARRELL, ANWAR E  
Address: 203 SW 85 TERRACE #101  
City-St-Zip: PEMBROKE PINES, FL 33025

Title: T ( ) Delete  
Name: BORIA, EDWARD V JR.  
Address: 857 BRADLEY STREET  
City-St-Zip: WEST HEMPSTEAD, NY 11552

Title: S ( ) Delete  
Name: CHARLOT, MARIE G  
Address: 59-30 108TH STREET APT 3PP  
City-St-Zip: REGO PARK, NY 11368

Title: S ( ) Delete  
Name: CHADWICK, THOMAS P  
Address: 4791 SW 82ND AVENUE, #37  
City-St-Zip: DAVIE, FL 33328

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: MARLENE FARRELL

MRS

09/05/2006

Electronic Signature of Signing Officer or Director

Date