

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000094265

FILED
Apr 26, 2006
Secretary of State

Entity Name: MARXIS CONSTRUCTION CLEANING INC.

Current Principal Place of Business:

3437 CYPRESS POINT CIRCLE
SAINT CLOUD, FL 34772 US

New Principal Place of Business:

Current Mailing Address:

3437 CYPRESS POINT CIRCLE
SAINT CLOUD, FL 34772 US

New Mailing Address:

FEI Number: 20-3162791

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROSA, LEXINE
3437 CYPRESS POINT CIRCLE
SAINT CLOUD, FL 34772 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ROSA, FELIX M
Address: 3437 CYPRESS POINT CIRCLE
City-St-Zip: SAINT CLOUD, FL 34772 US

Title: S () Delete
Name: ROSA, LEXINE
Address: 3437 CYPRESS POINT CIRCLE
City-St-Zip: SAINT CLOUD, FL 34772 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ROSA, FELIX M
Address: 2327 MARGARITA COURT
City-St-Zip: KISSIMMEE, FL 34741 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: LEXINE ROSA

S

04/26/2006

Electronic Signature of Signing Officer or Director

Date