2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

## Jun 20, 2006 8:00 am Secretary of State DOCUMENT # P05000096090 05-10-2006 90094 015 \*\*\*150.00 MOM'S CLEANING SERVICE OF PALM BEACH INC. Principal Place of Business Mailing Address 1116 OAKWATER DR. ROYAL PALM BEACH FL 33411 1116 OAKWATER DR. ROYAL PALM BEACH FL 33411 BBUZUUDA 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/05) City & State Applied For City & State 4. FEI Number Not Applicable Zio Country Country \$8.75 Additional 5. Certificate of Status Desired $\Box$ Fee Required 7. Name and Address of New Registered Agent 5. Name and Address of Current Registered Agent SPENCER, RANDEE Street Address (P.O. Box Number is Not Acceptable) 1116 OAKWATER DR. **ROYAL PALM BEACH FL 33411** City Zip Code 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. Signature, typed or privide name of registered agent and tipe if applicable, (NOTE: Registered Agent eigheture returned when rematating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May 8e After May 1, 2006 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 FITLE ☐ Detete TITLE ■ Addition SPENCER, RANDEE NAME NAME STREET ADDRESS 1116 OAKWATER DR. STREET ADDRESS CITY-ST-ZIP ROYAL PALM BEACH FL 33411 CITY-ST-7P Delete TITLE ☐ Chance ☐ Addition MAME PUCCIO, MICHAEL NAME STREET ADDRESS 1116 OAKWATER DR. STREET ADDRESS CITY-ST-ZIP ROYAL PALM BEACH FL 33411 CTY-ST-ZIP THE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY+ST-ZIP 017V-ST-78P Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP TITLE ☐ Delete TATLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes, I further certify that the information indicated on this report or supplier and 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 of 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:

ATTACHMENT
66020082

700518896896

	7-1-1-7-19-05088096890 June 14200le
	To behom It May Concern
	I do not loish to proceed with
	tiling. I wish to have my processing.
	1 he business "Illians Cleaning Services
	no more comparation or pushness. My accompant
	has closed the business books. It is need
	Thank you for your time
	Japan L. Senn
·-··	