

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000027505

FILED  
Aug 01, 2008  
Secretary of State

Entity Name: KISS IT CLEANING COMPANY, INC.

## Current Principal Place of Business:

902 JUNO DRIVE  
LEHIGH ACRES, FL 33936

## New Principal Place of Business:

902 JUNO DRIVE  
LEHIGH ACRES, FL 33936 US

## Current Mailing Address:

902 JUNO DRIVE  
LEHIGH ACRES, FL 33936

## New Mailing Address:

902 JUNO DRIVE  
LEHIGH ACRES, FL 33936 US

FEI Number: 20-4365378

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WANDERON, THOMAS  
809 WALKERBILT ROAD  
SUITE 5  
NAPLES, FL 34110 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: DP ( ) Delete  
Name: KOLENDA, FIONA  
Address: 902 JUNO DRIVE  
City-St-Zip: LEHIGH ACRES, FL 33936

Title: VP ( ) Delete  
Name: FORMOSA, HEATHER  
Address: 4212 LEE BLVD.  
City-St-Zip: LEHIGH ACRES, FL 33971

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DP (X) Change ( ) Addition  
Name: KOLENDA, FIONA K  
Address: 4212 LEE BLVD.  
City-St-Zip: LEHIGH ACRES, FL 33971

I hereby certify that the information supplied with this filing does not qualify 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: FIONA KOLENDA

DP

08/01/2008

Electronic Signature of Signing Officer or Director

Date