2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 10, 2008 08:00 All Secretary of State

		ANNUAL	KEPUKI	T	 1	•	Secretary of	St
		P060000446	80		A	•	·	
1. Entity Name OLGA RUDAKOVA CLEANING SERVICE, INC.								
Principal Place	e of Business		Mailing Address	1				
7833 ELVIA		ше	7833 ELVIA DR.	ис				
JACKSONVILL	.E, Fl. 32211	US	JACKSONVILLE, FL 32211	US		II 44 11 4 41 4 41 4 41 4 41		
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ra Karrala da					: 9	e of Status Desired	Not Apptica	able
i cheesening	R Name and	Address of Current Re	nistered Agent		3. Certificate	, or dialds Desired	Fee Required	
	o, Maille alic	Address of Cartell Re	Ristolad Wilait		X 140400 UM			
RUDAKOVA, OLGA 7833 ELVIA DR.					DO	NOT W	RITE	. nij
JACKSONVILLE, FL 32211					IN.	THIS SP	DACE	
						11110		
5 Th				127. 44. Ch. 14.		and the second of the		
	named entity sut ons of registered		e purpose of changing its registe	rea onice or reg	ssered agent, or bo	m, in the State of Fig	orida. I am tamiliar with, and acc	ept
SIGNATURE_	Signature, typed or our	nted name of registered agent and	trie if applicable. (NOTE: Register	ed Agent soneture re	quired when reinstating)		DATE	
FILI After Ma	E NOW!!! FE by 1, 2008 Fe	E IS \$150.00 ee will be \$550.00	Election Campaign Fina Trust Fund Contribution		\$5.00 May Be Added to Fees			Ì
10.		OFFICERS AND DIF	RECTORS				rin amadisa in ningi dadama a mata	7
TITLE NAME	P . RUDAKOVA,							
STREET ADDRESS		OLGA		\$52 \$ }m.				alta six
	7833 ELVIA D	R.						
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12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

STREET ADDRESS City-St-Zip

NAME STREET ADDRESS

> Olyan Rudakota SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03-31-08

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Daytima Phone #