



2007 FOR PROFIT CORPORATION ANNUAL REPORT

8/31/2007-90002-032-\$158.75-\$158.75

DOCUMENT # P06000101399 1. Entity Name AIM JANITORIAL SERVICE, CORP.				FILED 07 SEP 21 PM 2: 22 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Principal Place of Business P.O. BOX 142 AUBURDALE, FL 33823		Mailing Address P.O. BOX 142 AUBURDALE, FL 33823			
2. Principal Place of Business - No P.O. Box # 1116 SPRING CT		3. Mailing Address P.O. BOX 142			
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 			
City & State Auburndale, FL		City & State Auburndale FL 33823		4. FEI Number 20-5267361 Applied For <input checked="" type="checkbox"/> Not Applicable <input type="checkbox"/>	
Zip 33823		Zip 33823		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CANTLEY, PEGGY 1116 SPRING COURT AUBURDALE, FL 33823				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL 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 _____ (NOTE: Registered Agent signature required when changing) DATE _____					
FILE NOW!!! FEE IS \$550.00 Due by September 14, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CANTLEY, PEGGY P.O. BOX 142 AUBURDALE, FL 33823	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HAIFLICH, VAN P.O. BOX 142 AUBURDALE, FL 33823	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
12. I hereby 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: <i>Peggy Cantley</i> 8/19/07 863-967-5772					

ATTACHMENT

40130943

STATE OF FLORIDA
COUNTY OF Polk

#P06000101399

Before me this day personally appeared M. Peggy L. Cantley who, being duly sworn, deposes and says:

By signing and submitting this application, I acknowledge individually and on behalf of the applicant business that the applicant and I understand that:

- * The applicant has the burden of establishing entitlement to certification.
- * All information and documents submitted along with the Florida Statewide and Inter-local Minority Business Enterprise Certification Application or Affidavit for Re-certification becomes an official public record. As such, the certifying entity bears no obligation to return to the applicant any items of original production or any copies of file documents.
- * The applicant consents to examinations of its books, records and premises and to interviews of its principals, employees, business contacts, creditors, and bonding companies by the certifying entity for the purpose of determining the applicant's eligibility for certification.
- * The certifying entity may request additional documentation not requested on this application.
- * Pursuant to Section 287.094, Florida Statutes, it is unlawful for any individual to falsely claim to be a minority business enterprise for the purpose of qualifying for certification with any governmental certifying organization, which is punishable as a felony of the second degree.
- * Pursuant to Florida Statutes 837.06: False official statements-Whoever knowingly makes a false statement in writing with the intent to mislead a public servant in the performance of his or her official duty shall be guilty of a misdemeanor of the second degree, punishable as provided in s. 775.082 or s. 775.083.

Affix Corporate Seal Here

Authorized Officer (please print)

PEGGY CANTLEY

Signature

Peggy Cantley

Title

PRESIDENT

Company Name

Aim Janitorial Service, Inc.

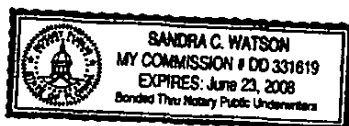
Sworn to (or affirmed) and subscribed before me this 27th day of August
2007, by M. Peggy L. Cantley

Personally Known ☒ or

Produced Identification ☐ &

Type of Identification ☐

(NOTARY SEAL)



Sandra Watson
Notary Signature