

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000136949

FILED
Jan 05, 2007
Secretary of State

Entity Name: USA JANITORIAL SERVICE COMPANY

Current Principal Place of Business:

2046 TREASURE COAST PLAZA
STE A PMB 133
VERO BEACH, FL 32960

New Principal Place of Business:

Current Mailing Address:

2046 TREASURE COAST PLAZA
STE A PMB 133
VERO BEACH, FL 32960

New Mailing Address:

FEI Number: 20-5792306

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COSTA DA SILVA, ERIKA
4701 N. FEDERAL HWY., STE. 365
POMPANO BEACH, FL 33064 US

Name and Address of New Registered Agent:

SILVA, ERIKA C
2046 TREASURE COAST PLAZA
STE A PMB 133
VERO BEACH, FL 32960 US

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: ERIKA C. SILVA

01/05/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: COSTA DA SILVA, ERIKA
Address: 4701 N. FEDERAL HWY., STE. 365
City-St-Zip: POMPANO BEACH, FL 33064

Title: V () Delete
Name: DE SOUSA SANTOS, SUELI
Address: 4701 N. FEDERAL HWY., STE. 365
City-St-Zip: POMPANO BEACH, FL 33064

Title: D () Delete
Name: DA SILVA SALES, LILIAN N.
Address: 4701 N. FEDERAL HWY., STE. 365
City-St-Zip: POMPANO BEACH, FL 33064

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: SILVA, ERIKA C
Address: 2046 TREASURE COAST PLAZA STE A PMB 133
City-St-Zip: VERO BEACH, FL 32960

Title: V (X) Change () Addition
Name: SANTOS, SUELI S
Address: 2046 TREASURE COAST PLAZA STE A PMB 133
City-St-Zip: VERO BEACH, FL 32960

Title: D (X) Change () Addition
Name: SALES, LILIAN N
Address: 2046 TREASURE COAST PLAZA STE A PMB 133
City-St-Zip: VERO BEACH, FL 32960

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: ERIKA C. SILVA

DP

01/05/2007

Electronic Signature of Signing Officer or Director

Date