

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000020614

FILED
Apr 28, 2008
Secretary of State

Entity Name: ADVANCED JANITORIAL SERVICES, INC.

Current Principal Place of Business:

304 GARDENS DR APT 102
POMPAÑO BEACH, FL 33069

New Principal Place of Business:

816 SE 9TH STREET SUITE 2B
DEERFIELD BEACH, FL 33441

Current Mailing Address:

304 GARDENS DR APT 102
POMPAÑO BEACH, FL 33069

New Mailing Address:

816 SE 9TH STREET SUITE 2B
DEERFIELD BEACH, FL 33441

FEI Number: 20-8453435

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TAX HOUSE CORPORATION
1261 E SAMPLE RD
POMPAÑO BEACH, FL 33064 US

Name and Address of New Registered Agent:

TAX HOUSE CORPORATION
1100 S FEDERAL HWY
DEERFIELD BEACH, FL 33441 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: TAX HOUSE

04/28/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MOREIRA, CLAUDEMIR
Address: 304 GARDENS DR APT 102
City-St-Zip: POMPAÑO BEACH, FL 33069

Title: V () Delete
Name: ZARRO, ROSE M
Address: 304 GARDENS DR APT 102
City-St-Zip: POMPAÑO BEACH, FL 33069

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MOREIRA, CLAUDEMIR
Address: 816 SE 9TH STREET SUITE 2B
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: V (X) Change () Addition
Name: ZARRO, ROSE M
Address: 816 SE 9TH STREET SUITE 2B
City-St-Zip: DEERFIELD BEACH, FL 33441

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: CLAUDEMIR MOREIRA

PD

04/28/2008

Electronic Signature of Signing Officer or Director

Date