2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000030868

Entity Name: WONDERFUL'S CLEANING SERVICE, INC

FILED Apr 21, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

665 NW FAIRHAVEN DRIVE 3725 SE FEDERAL HWY PORT ST LUCIE, FL 34983 STUART, FL 34997

Current Mailing Address: New Mailing Address:

PO BOX 13016 FORT PIERCE, FL 34979

FEI Number: 20-2382569 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MONDS, INEZ S
3210 LOUISIANA AVE
APT 2
FT PIERCE, FL 34947 US

MONDS, INEZ S
1544 SE ROYAL GREEN CIRCLE
APT K104
PORT ST LUCIE, FL 34952 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.

Title:

SIGNATURE: INEZ S MONDS 04/21/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

PRES () Delete Title: PRES (X) Change () Addition MONDS, WONDERFUL T III Name: MONDS, WONDERFUL T III

 Name:
 MONDS, WONDERFUL T III
 Name:
 MONDS, WONDERFUL T III

 Address:
 665 NW FAIRHAVEN DRIVE
 Address:
 1544 SE ROYAL GREEN CIRCLE APT K104

City-St-Zip: PORT ST LUCIE, FL 34983 City-St-Zip: PORT ST LUCIE, FL 34952

Title: SECR () Delete Title: () Change () Addition

 Name:
 SUMPTER, SHERRI N
 Name:

 Address:
 665 NW FAIRHAVEN DRIVE
 Address:

 City-St-Zip:
 PORT ST LUCIE, FL 34983
 City-St-Zip:

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: SHERRI N SUMPTER SECR 04/21/2008