


2008 FOR PROFIT CORPORATION ANNUAL REPORT

9/12/2008-90001-027-\$150.00-\$150.00

FILED

08 SEP 29 PM 3:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P07000067313			
1. Entity Name AA & M CARPET CLEANING INC.			
Principal Place of Business 327 E 40TH STREET HIALEAH, FL 33013		Mailing Address 327 E 40TH STREET HIALEAH, FL 33013	
2. Principal Place of Business - No P.O. Box # 326 WEST 12 ST.		3. Mailing Address 326 WEST 12 ST.	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State HIALEAH, FL		City & State HIALEAH, FL	
Zip 33010		Zip 33010	
Country		Country	
4. FEI Number 26-0209591		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent NARBONA, ALEJANDRO 327 E 40TH STREET HIALEAH, FL 33013		7. Name and Address of New Registered Agent Name NARBONA, ALEJANDRO Street Address (P.O. Box Number is Not Acceptable) 326 WEST 12 ST. City HIALEAH FL Zip Code 33010	
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 _____ <small>Signature typed or printed name of registered agent and state of appointment (NOTE: Registered Agent signature required when reinstating) DATE</small>			
FILE NOW!!! FEE IS \$150.00 Due by September 12, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P NARBONA, ALEJANDRO 327 E 40TH STREET HIALEAH, FL 33013 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	P NARBONA, ALEJANDRO 326 WEST 12 ST. HIALEAH, FL 33010 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP GONZALEZ, MIREYA 327 E 40TH STREET HIALEAH, FL 33013 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP GONZALEZ, MIREYA 326 WEST 12 ST. HIALEAH, FL 33010 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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>[Signature]</i>		Signature and Typed Name of Signing Officer or Director: Alejandro Narbona	
		Date: 9/10/08 (561) 492-8715	