## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P07000097549

Address:

City-St-Zip:

Entity Name: LAKELAND CLEANING CORPORATION

FILED Jun 05, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 3839 COUNTRY BEND EAST LAKELAND, FL 33811 **Current Mailing Address: New Mailing Address:** 3839 COUNTRY BEND EAST LAKELAND, FL 33811 FEI Number: 26-0819036 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: MENDOZA, JOSUE I 3828 GOLF VILLAGE LOOP APT#5 LAKELAND, FL 33809 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: Electronic Signature of Registered Agent Date In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PRES ( ) Delete () Change () Addition MENDOZA, ISMAEL Name: Name: 3839 COUNTRY BEND E Address: Address: City-St-Zip: LAKELAND, FL 33811 US City-St-Zip: Title: () Delete Title: ( ) Change (X) Addition Name: Name: MENDOZA, LUISA 3839 COUNTRY BEND E Address: Address: LAKELAND, FL 33811 City-St-Zip: City-St-Zip: Title: ( ) Change (X) Addition () Delete Title: MENDOZA, JAFET Name: Name: 3839 COUNTRY BEND E Address Address: City-St-Zip: City-St-Zip: LAKELAND, FL 33811 Title: () Delete Title: ( ) Change (X) Addition MENDOZA, ALEJANDRA Name: Name:

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.

Address:

City-St-Zip:

3828 GOLF VILLAGE LOOP #5

LAKELAND, FL 33809

SIGNATURE: ISMAEL MENDOZA PRES 06/05/2009