

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000106955

FILED
Apr 29, 2009
Secretary of State

Entity Name: KALEX PROPERTY MAINTENANCE SERVICES, INC.

Current Principal Place of Business:

1813 NW 16TH PLACE
CAPE CORAL, FL 33993 US

New Principal Place of Business:

1223 NW 9TH AVE
CAPE CORAL, FL 33993 US

Current Mailing Address:

1813 NW 16TH PLACE
CAPE CORAL, FL 33993 US

New Mailing Address:

1223 NW 9TH AVE
CAPE CORAL, FL 33993 US

FEI Number: 26-1133687

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARCE ARANGO, ALEXANDER
1813 NW 16TH PLACE
CAPE CORAL, FL 33993 US

Name and Address of New Registered Agent:

ARCE ARANGO, ALEXANDER
1223 NW 9TH AVE
CAPE CORAL, FL 33993 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: ALEXANDER ARCE

04/29/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P/T () Delete
Name: ARCE ARANGO, ALEXANDER
Address: 1813 NW 16TH PLACE
City-St-Zip: CAPE CORAL, FL 33993 US

Title: VP/S () Delete
Name: ARCE ARANGO, ALEXANDER
Address: 1813 NW 16TH PLACE
City-St-Zip: CAPE CORAL, FL 33993 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/T (X) Change () Addition
Name: ARCE ARANGO, ALEXANDER
Address: 1223 NW 9TH AVE
City-St-Zip: CAPE CORAL, FL 33993 US

Title: VP/S (X) Change () Addition
Name: ARCE ARANGO, ALEXANDER
Address: 1223 NW 9TH AVE
City-St-Zip: CAPE CORAL, FL 33993 US

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: ALEXANDER ARCE

P

04/29/2009

Electronic Signature of Signing Officer or Director

Date