2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 13, 2009
Secretary of State

DOCUMENT# P08000046628

Entity Name: ANGEL QUALITY CLEANING,CORP

Current Principal Place of Business:

1240 W 24 STREET
HIALEAH, FL 33010 US

New Principal Place of Business:

535 EAST 49 STREET
HIALEAH, FL 33013 US

Current Mailing Address:

1240 W 24 STREET
HIALEAH, FL 33010 US

New Mailing Address:

535 EAST 49 STREET
HIALEAH, FL 33013 US

FEI Number: 26-2578910 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PONCE DE LEON, ANGEL
1240 W 24 STREET
HIALEAH, FL 33010 US

Name and Address of New Registered Agent:

PONCE DE LEON, ANGEL
535 EAST 49 STREET
HIALEAH, FL 33013 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: ANGEL PONCE DE LEON 05/13/2009
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:

Title: P ( ) Delete
Name: PONCE DE LEON, ANGEL
Address: 1240 W 24 STREET
City-St-Zip: HIALEAH, FL 33010 US

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: PONCE DE LEON, ANGEL
Address: 535 EAST 49 STREET
City-St-Zip: HIALEAH, FL 33012 US

Title: VP ( ) Change (X) Addition
Name: PAVIA, ADRIAN
Address: 535 EAST 49 STREET
City-St-Zip: HIALEAH, FL 33012 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: ANGEL PONCE DE LEON P 05/13/2009
Electronic Signature of Signing Officer or Director Date