

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000016694

**FILED**  
**Jan 28, 2011**  
**Secretary of State**

**Entity Name:** M.D. CLEANING & MAINTENANCE INC.

**Current Principal Place of Business:**

7028 SE TWIN OAKS CIRCLE  
STUART, FL 34997

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 6245  
STUART, FL 349976245

**New Mailing Address:**

**FEI Number:** 27-1975360

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DANIELS, MICHAEL  
7028 SE TWIN OAKS CIRCLE  
STUART, FL 34997 US

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

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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: DANIELS, MICHAEL  
Address: 7028 SE TWIN OAKS CIRCLE  
City-St-Zip: STUART, FL 34997

Title: ST  
Name: JUREK, CRYSTAL D  
Address: 641 SE STARFISH AVE  
City-St-Zip: PORT ST LUCIE, FL 34983

I hereby 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 all other like empowered.

SIGNATURE: MICHAEL DANIELS

P

01/28/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date