


**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**May 01, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P94000022096</b> 1. Entity Name <b>ANDRES AND BOBBYS JANITORIAL SERVICE, INC.</b>	
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Principal Place of Business <b>2666 NUMILLA DR ORLANDO, FL 32839-5244</b>	Mailing Address <b>2666 NUMILLA DR ORLANDO, FL 32839-5244</b>
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**DO NOT WRITE IN THIS SPACE**



04252006 No Chg-P CR2E034 (11/05)

4. FEI Number <b>59-3255374</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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<b>6. Name and Address of Current Registered Agent</b>  <b>TATE, TOMMY 2666 NUMILLA DR ORLANDO, FL 32839-5244</b>
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IN THIS SPACE**

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 *Tommy Tate* NA (NOTE: Registered Agent signature required when reinstating) DATE 4/24/06

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD TATE, AGNES D 2666 NUMILLA DR ORLANDO, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTS TATE, TOMMY L 2666 NUMILLA DR ORLANDO, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DM TATE, BOBBY L 5256 AIRPARA DR ORLANDO, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C TATE, ANDRE 5659 NOKOMIS DR ORLANDO, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

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: *Tommy Tate* 4/24/06