

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 22, 2004 8:00 am
Secretary of State

04-22-2004 90090 043 ***150.00

DOCUMENT # P94000023683

1. Entity Name

DEBBIES CHRISTIAN CLEANING SERVICE INC.



Principal Place of Business

**3847 ZION ROAD
JACKSONVILLE FL 32207
US**

Mailing Address

**3847 ZION ROAD
JACKSONVILLE FL 32207
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



MOORE

CR2E034 (11/03)

4. FEI Number **59-3231268**

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MARIN, DEBORAH
3847 ZION ROAD
JACKSONVILLE FL 32207**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Deborah Marin **Deborah Marin owner**

4/5/04

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	MARIN, DEBORAH	
STREET ADDRESS	3847 ZION ROAD	
CITY-ST-ZIP	JACKSONVILLE FL 32207	
TITLE	VP	<input type="checkbox"/> Delete
NAME	MORRISON, ELSIE	
STREET ADDRESS	9380 103RD ST., LOT 113	
CITY-ST-ZIP	JACKSONVILLE FL 32210	
TITLE	GM	<input type="checkbox"/> Delete
NAME	ROWELL, TRACY	
STREET ADDRESS	3960 OLD SUNBEAM RD., #802	
CITY-ST-ZIP	JACKSONVILLE FL 32257	
TITLE	S	<input checked="" type="checkbox"/> Delete
NAME	PARRY, DAWN	
STREET ADDRESS	3960 OLD SUNBEAM RD., #802	
CITY-ST-ZIP	JACKSONVILLE FL 32277	
TITLE	S	<input checked="" type="checkbox"/> Delete
NAME	WATTS, BEVERLY	
STREET ADDRESS	1154 INGLESIDE AVE	
CITY-ST-ZIP	JACKSONVILLE FL 32205	
TITLE	T	<input type="checkbox"/> Delete
NAME	KEENUM, JAMES	
STREET ADDRESS	9380 103RD STREET, #113	
CITY-ST-ZIP	JACKSONVILLE FL 32210	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	Same	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Deborah Marin	
STREET ADDRESS	president	
CITY-ST-ZIP		
TITLE	VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Tracy Rowell	
STREET ADDRESS	3960 Old Sunbeam Rd	
CITY-ST-ZIP	# 306 Jax FL 32257	
TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Chantal Buraczewski	
STREET ADDRESS	3960 Old Sunbeam Rd # 306	
CITY-ST-ZIP	Jax FL 32257	
TITLE	GM	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Elsie Morrison	
STREET ADDRESS	9380 103rd St. Lot 113	
CITY-ST-ZIP	Jax FL 32210	
TITLE	Same S	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Beverly watts	
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Same T	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	James Keenum	
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

Deborah Marin **Deborah Marin** **4/5/04**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #