

**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

DOCUMENT # P94000079573

1. Entity Name  
G. & L. CLEANING, INC.



**FILED  
May 01, 2006 8:00 am  
Secretary of State**

05-01-2006 90408 017 \*\*\*150.00

40076110



03272006 Chg-P CR2E034 (11/05)

Principal Place of Business  
P.O. BOX 20634  
BRADENTON, FL 34204

Mailing Address

P.O. BOX 20634  
BRADENTON, FL 34204 US

2. Principal Place of Business  
205 65TH Ave. West

3. Mailing Address  
2335 J 63rd Ave East

Suite, Apt. #, etc.

Suite, Apt. #, etc.

J

City & State  
BRADENTON, FL

City & State  
BRADENTON, FL

Zip 34207

Country MANATEE

Zip 34203

Country MANATEE

4. FEI Number  
65-0512518

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

GORE, GAYLE  
205 65TH AVE. WEST  
BRADENTON, FL 34207

7. Name and Address of New Registered Agent  
Name DONALD H. HECKMAN  
Street Address (P.O. Box Number is Not Acceptable)  
2335 J 63rd Ave East  
City BRADENTON FL Zip Code 34203

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

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, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution

**\$5.00 May Be  
Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DP  
NAME GORE, GAYLE  
STREET ADDRESS 205 65TH AVE. WEST  
CITY-ST-ZIP BRADENTON, FL 34207

Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

Change  Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

Change  Addition

TITLE  
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CITY-ST-ZIP

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Change  Addition

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CITY-ST-ZIP

Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

Change  Addition

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: *Gayle Gore*

4/21/06

Date

Daytime Phone #

*President*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR