FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

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DOCUMENT #

P95000034400 (8)

EXECUTIVE CLEANING SERVICES OF CENTRAL FLORIDA, INC.

Principal Place of Business

Mailing Address



4125 BARN ORLANDO	SKEY DRIVE FL 32812	4125 BARNSLEY DRIVI ORLANDO 1. 32812	ŧ						
				3. Date Incorporated or Qualified 05/03/1995	3a. Date of Last Report				
2. Principal Pla	ace of Business	2a. Mailing Address		4. FEI Number	Applied For				
21 789 Bo	onita Drive	26 789 Bonita	Drive	59-3320051	Not Applicable				
Suite, Apt. 4	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required				
City & State 23 Winter	r Park, FL 32789	City & State 28 Winter Park	, FL 32789	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees				
Zip 32	[25]	. 1	Country USA	8. This corporation has liability for Florida Statutes Yes					
	Name and Address of Current	Registered Agent		10. Name and Address of New R	legistered Agent				
4125 B	ISA, PATRICIA ARNSLEY DRIVE DO FL 32812		81 Name82 Street A	Kathy Haendiges Address (P.O. Box Number is Not Acceptab 789 Bonita Drive	vle)				
/			84 City	Winter Park	FL 85 Zip Code 32789				
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and eccept the appointment as registered agent. I am									
SIGNATURE _	Signature Jypey or printed name of regime and agent a	NOTE OF APPLICATION OF THE PROPERTY OF THE PRO	: Registered Agent signature re	aquired when reinstating)	18,1176				
12.			13.	ADDITIONS/CHANGES TO OFFI	ICERS AND DIRECTORS IN 12				
TITLE	D	∑ DELETE	1. 1 TITLE	President	Change Addition				
NAME	HERMOSA, PATRICIA		1.2 NAME	Kathy Haendiges					
STREET ADDRESS	4125 BARNSLEY DRIVE		1.3 STREET ADDRESS	789 Bonita Drive	l i				
CITY-ST-ZiP	ORLANDO FL 32812		1.4 CITY - ST - ZIP	•	2789				
TITLE		₹ DELETE	2 1 TITLE		Change Addition				
NAME	HERMOŠA, EDWARD		22 NAME						
STREET ADDRESS	4125 BARNSLEY DRIVE		23 STREET ADDRESS						
CITY-ST-ZIP	ORLANDØ FL 92812		24 CITY-ST-ZIP						
TITLE		☐ DELETE	3 1 TITLE		☐ Change ☐ Addition				
NAME	~		3.2 NAME						
STREET ADDRESS			3.3 STREET ADDRESS						
CITY-ST-ZIP			3.4 CITY - ST - ZIP						
TITLE		□ DELETE	4. 1 TITLE		☐ Change ☐ Addition				
NAME			4.2 NAME						
STREET ADDRESS			4.3 STREET ADDRESS		1				
CITY - ST - ZIP			4.4 CITY - ST - ZiP						
TITLE		□ DELETE	5 1 TITLE		Change Addition				
NAME			5.2 NAME						
STREET ADDRESS			5.3 STREET ADDRESS	_	1				
CITY-ST-ZIP			5.4 CITY - ST - ZIP	<u> </u>	ļ				
TITLE		☐ DELETE	6. 1 TITLE		☐ Change ☐ Addition				
NAME			6.2 NAME						
STREET ADDRESS			6.3 STREET ADDRESS						
CiTY-ST-ZiP			6.4 CITY-ST-ZIP						
14. I do hereby	certify that the information supplied wi	th this filing is voluntarily furnish	ed and does not qual	ify for the exemption stated in Section 119.6	07(3)(k), Florida Statutes, I further				

certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if phaneou, or ordan attachment with an address.

SIGNATURE: