
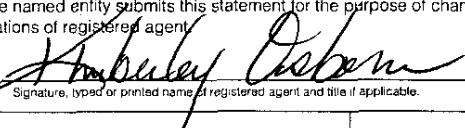


# 2004 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATION  
04 AUG -3 PM 4:29

<b>DOCUMENT # P97000018664</b> 1. Entity Name THE ULTIMATE CLEANING CREW, INC.																																																																																																																																			
Principal Place of Business 915 GATESHEAD COURT KISSIMMEE, FL 34758			Mailing Address 717 EAST OAK STREET KISSIMMEE, FL 34744																																																																																																																																
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.																																																																																																																																
City & State			City & State																																																																																																																																
Zip		Country		4. FEI Number <b>59-3429831</b>																																																																																																																															
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable																																																																																																																															
6. Name and Address of Current Registered Agent <b>BAUMRUK, ANDY J CPA</b> <b>717 E. OAK STREET</b> <b>KISSIMMEE, FL 34744</b>				7. Name and Address of New Registered Agent Name <b>Kimberly Osborne</b> Street Address (P.O. Box Number is Not Acceptable) <b>915 Gateshead Court</b> City <b>Kissimmee</b>																																																																																																																															
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:  <b>Kimberly Osborne</b> <span style="float: right;">7/30/04</span> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>																																																																																																																																			
<b>Amended AR is \$61.25</b>			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees																																																																																																																																
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="3" style="text-align: left;">10. OFFICERS AND DIRECTORS</th> <th colspan="3" style="text-align: left;">11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</th> </tr> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 65%;">PSD</td> <td style="width: 20%; text-align: right;"><input type="checkbox"/> Delete</td> <td style="width: 15%;">TITLE</td> <td style="width: 65%;">P,D</td> <td style="width: 20%; text-align: right;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td>OSBORNE, KIMBERLEY</td> <td></td> <td>NAME</td> <td><b>500040251645</b></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>915 GATESHEAD COURT</td> <td></td> <td>STREET ADDRESS</td> <td><b>08/17/04--01059--020 **61.25</b></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>KISSIMMEE, FL 34758</td> <td></td> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td>VPTD</td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> <td>TITLE</td> <td>VP,S,D</td> <td style="text-align: right;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td>BARAN, PEGGY A</td> <td></td> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>844 SAN PEDRO COURT</td> <td></td> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>KISSIMMEE, FL 34758</td> <td></td> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> <td>TITLE</td> <td>T,D</td> <td style="text-align: right;"><input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> <td>NAME</td> <td>Osborne, Jonathan</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> <td>STREET ADDRESS</td> <td>915 Gateshead Court</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> <td>CITY-ST-ZIP</td> <td>Kissimmee, FL 34758</td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table>						10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			TITLE	PSD	<input type="checkbox"/> Delete	TITLE	P,D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME	OSBORNE, KIMBERLEY		NAME	<b>500040251645</b>		STREET ADDRESS	915 GATESHEAD COURT		STREET ADDRESS	<b>08/17/04--01059--020 **61.25</b>		CITY-ST-ZIP	KISSIMMEE, FL 34758		CITY-ST-ZIP			TITLE	VPTD	<input type="checkbox"/> Delete	TITLE	VP,S,D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME	BARAN, PEGGY A		NAME			STREET ADDRESS	844 SAN PEDRO COURT		STREET ADDRESS			CITY-ST-ZIP	KISSIMMEE, FL 34758		CITY-ST-ZIP			TITLE		<input type="checkbox"/> Delete	TITLE	T,D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	NAME			NAME	Osborne, Jonathan		STREET ADDRESS			STREET ADDRESS	915 Gateshead Court		CITY-ST-ZIP			CITY-ST-ZIP	Kissimmee, FL 34758		TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			NAME			STREET ADDRESS			STREET ADDRESS			CITY-ST-ZIP			CITY-ST-ZIP			TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			NAME			STREET ADDRESS			STREET ADDRESS			CITY-ST-ZIP			CITY-ST-ZIP		
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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.																																																																																																																																			
<b>SIGNATURE:</b>  <b>President</b> <span style="float: right;">7/30/04 407-709-2530</span> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>																																																																																																																																			