## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # P97000103004

1. Entity Name MAJOR CLEANING TEAM INC.

FILED Apr 20, 2007 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

648 LITTLE WEKIVA ROAD ALTAMONTE SPRINGS, FL 32714 648 LITTLE WEKIVA ROAD ALTAMONTE SPRINGS, FL 32714



DO NOT WRITE IN THIS SPACE

04152007 No Chg-P CR2E034 (11/05)

 4. FEI Number
 Applied For

 59-3479545
 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GARTNER, JOHN T 648 LITTLE WEKIVA ROAD ALTAMONTE SPRINGS, FL 32714

## DO NOT WRITE 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 Fiorida. 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, 2007 Fee will be \$550.00		Election Campaigr     Trust Fund Contrib		\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS	1		
TITLE	P		*		
NAME	GARTNER, JOHN T		•		
STREET ADDRESS	648 LITTLE WEKIVA RD				
CITY-ST-ZIP	ALTAMONTE SPRINGS, FL 32714				
TITLE					
NAME					U00000719389
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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.					

ME OF SIGNING OFFICER OR DIRECTOR