

# **2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P98000041841

**FILED**  
**Mar 21, 2006**  
**Secretary of State**

**Entity Name:** AINSLEY'S-PORTER AND JANITORIAL SERVICES, INC.

**Current Principal Place of Business:**

2020 W. MCNAB RD  
SUITE 103  
FORT LAUDERDALE, FL 33309

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 15095  
PLANTATION, FL 33318

**New Mailing Address:**

**FEI Number:** 65-0831352

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

EDWARDS, NEOLA  
2020 W. MCNAB RD  
SUITE 103  
FT. LAUDERDALE, FL 33069 US

**Name and Address of New Registered Agent:**

MCQUENNIE, NEOLA  
2020 W. MCNAB RD  
SUITE 103  
FT. LAUDERDALE, FL 33069 US

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.

SIGNATURE: NEOLA MCQUENNIE

03/21/2006

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: VT ( ) Delete  
Name: HAUGHTON, AINSLEY  
Address: 605 SW 65 AVE.  
City-St-Zip: MARGATE, FL 33068

Title: PS ( ) Delete  
Name: EDWARDS, NEOLA  
Address: 3101 NW 47 TERRACE, BLDG 4-# 227  
City-St-Zip: FORT LAUDERDALE, FL 33319

Title: SEC ( ) Delete  
Name: NICHOLSON, GEORGIA  
Address: 6331 SW 6 STREET  
City-St-Zip: MARGATE, FL 33068

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: PS (X) Change ( ) Addition  
Name: MCQUENNIE, NEOLA  
Address: 3101 NW 47 TERRACE, BLDG 4-# 227  
City-St-Zip: FORT LAUDERDALE, FL 33319

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NEOLA MCQUENNIE

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03/21/2006

Electronic Signature of Signing Officer or Director

Date