2007 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P98000058746

1. Entity Name
FIRST IMPRESSIONS JANITORIAL, INC.



FILED Jan 31, 2007 8:00 am Secretary of State

01-31-2007 90043 021 ***150.00

Principal Place of Business

10621 FAIRHAVEN WAY ORLANDO, FL 32825 Mailing Address

P.O. BOX 570733 ORLANDO, FL 32857-0733



01232007

No Chg-P

CR2E034 (11/05)

4. FEI Number 59-3528127

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HARMON, LINDA C 10621 FAIRHAVEN WAY..... ORLANDO, FL 32825

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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. 1 - 29 - 0 7					
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		9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees			
10.	OFFICERS AND DIREC	CTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HARMON, LINDA C 10621 FAIRHAVEN WAY ORLANDO, FL 32825				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
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TITLE NAME STREET ADDRESS CITY-ST-ZIP					

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 agoriess, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPE PRINTED NAME OF SIGNING OFFICER OR DIRECTO

1-29-07

407) 273.185

Daytime Phone