

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000008605

FILED
Apr 30, 2004
Secretary of State

Entity Name: DEOSCENT CLEANING PRODUCTS, INC.

Current Principal Place of Business:

3900 NW 79TH AVE
SUITE 326
MIAMI, FL 33166

New Principal Place of Business:

8315 NW 64 ST
UNIT 6
MIAMI, FL 33166

Current Mailing Address:

3900 NW 79TH AVE
SUITE 326
MIAMI, FL 33166

New Mailing Address:

8315 NW 64 ST
UNIT 6
MIAMI, FL 33166

FEI Number: 65-0936678

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OVIEDO, MANUEL
3900 NW 79TH AVE
SUITE 326
MIAMI, FL 33166 US

Name and Address of New Registered Agent:

OVIEDO, MANUEL
8315 NW 64 ST
UNIT 6
MIAMI, FL 33166 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: MANUEL OVIEDO

04/30/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: OVIEDO, MANUEL
Address: 10025 NW 46TH ST #105
City-St-Zip: MIAMI, FL 33178

Title: SD () Delete
Name: OVIEDO, LUZ M
Address: 3900 NW 79TH AVE #324
City-St-Zip: MIAMI, FL 33166

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: OVIEDO, MANUEL
Address: 5512 NW 114 AVE APT 107
City-St-Zip: MIAMI, FL 33178

Title: SD (X) Change () Addition
Name: OVIEDO, LUZ M
Address: 8315 NW 64 ST #6
City-St-Zip: MIAMI, FL 33166

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MANUEL OVIEDO

PD

04/30/2004

Electronic Signature of Signing Officer or Director

Date