2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000065502

FILED Apr 28, 2005 Secretary of State

Entity Name: QUALITY CLEANING SERVICE OF VENICE, INC.

Current Principal Place of Business:		New Principal Place of Business:		
1587 SUS VENICE, F				
Current Mailing Address:		New Mailing Address:		
1587 SUS VENICE, F				
El Number	: 65-0932455	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	Address of C	urrent Registered Agent:	Name and Address o	of New Registered Agent:
WADE, JA 1587 SUS VENICE, F		8		
	_ 0.200			
			ourpose of changing its registered	d office or registered agent, or both,
	named entity se of Florida.		ourpose of changing its registered	d office or registered agent, or both,
n the State	named entity s e of Florida. RE:			d office or registered agent, or both, Date
n the State	named entity set of Florida. RE: Electron	submits this statement for the p		
n the State	named entity set of Florida. RE: Electron	submits this statement for the particle of Registered Ago Trust Fund Contribution ().	ent	
n the State	named entity set of Florida. RE: Electron mpaign Financing S AND DIRECT	ic Signature of Registered Age Trust Fund Contribution (). FORS: Delete ELYN C RD	ent	Date
n the State BIGNATUI Election Car DFFICER: Title: Name: Address:	e named entity see of Florida. RE: Electron mpaign Financing S AND DIRECT D () WADE, JACQUE 1587 SUSSEX F VENICE, FL 34:	ic Signature of Registered Age Trust Fund Contribution (). FORS: Delete ELYN C RD 293 Delete ES H RD	ent ADDITIONS/CHANGE Title: Name: Address:	Date ES TO OFFICERS AND DIRECTORS

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: CHARLES WADE PRES 04/28/2005