

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 21, 2005 8:00 am
Secretary of State

02-21-2005 90065 034 ***150.00

DOCUMENT # P99000071172 1. Entity Name ANCO CLEANING, INC.			
Principal Place of Business 1201 E. DONEGAN AVE STE 1201 KISSIMMEE, FL 34744-1948 US		Mailing Address 994 CARROLL ST., SUITE 7 KISSIMMEE, FL 34744-1948 US	
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country		3. Mailing Address 1201 E. DONEGAN AVE STE 1201 KISSIMMEE, FL 34744-1948 U.S.	
4. FEI Number 52-2187740		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SAVINON, ENRIQUE 2835 FLAMBOYAN ST KISSIMMEE, FL 34744		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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.			
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE _____			
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution: <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	DP SAVINON, ENRIQUE 994 CARROLL ST., SUITE 7 KISSIMMEE, FL 327441422	TITLE	DP SAVINON, ENRIQUE 2835 FLAMBOYAN ST KISSIMMEE, FL 34744
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	VSD	TITLE	VSD
NAME	SAVINON, ANA J	NAME	SAVINON, ANA J
STREET ADDRESS	994 CARROLL ST., SUITE 7	STREET ADDRESS	2835 FLAMBOYAN ST
CITY-ST-ZIP	KISSIMMEE, FL 327441422	CITY-ST-ZIP	KISSIMMEE, FL 34744
TITLE	VTD	TITLE	
NAME	BORI, PELEGRIN A	NAME	
STREET ADDRESS	994 CARROLL ST., SUITE 7	STREET ADDRESS	
CITY-ST-ZIP	KISSIMMEE, FL 327441422	CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
12. I hereby certify that the information supplied with this filing does not qualify 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 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.			
SIGNATURE:  ENRIQUE SAVINON		Date: 01/07/2005 Daytime Phone #: 407-870-0505	