

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V61985

FILED
Apr 02, 2004
Secretary of State

Entity Name: SQUEEKY CLEAN CLEANING & JANITORIAL SERVICE, INC.

Current Principal Place of Business:

2420 S.E. BLACKHORSE STREET
PORT ST. LUCIE, FL 34984

New Principal Place of Business:

Current Mailing Address:

2420 S.E. BLACKHORSE STREET
PORT ST. LUCIE, FL 34984

New Mailing Address:

FEI Number: 65-0350990

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRAUNSTEIN, ERIC J
6950 CYPRESS ROAD
SUITE 101
PLANTATION, FL 33317 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PS () Delete
Name: NEILSON, ELISSA L
Address: 2420 S.E. BLACKHORSE ST
City-St-Zip: PORT ST. LUCIE, FL

Title: VP () Delete
Name: SIEGEL, BEATRICE
Address: 9170 SW 14TH ST #4101
City-St-Zip: BOCA RATON, FL

Title: T () Delete
Name: PADRICK, MINDY
Address: 2381 FRIDAY RD
City-St-Zip: COCOA BEACH, FL 32926

Title: S () Delete
Name: NEILSON, DOUGLAS
Address: 2420 SE BLACKHORSE ST
City-St-Zip: PORT ST LUCIE, FL 34984

Title: S () Delete
Name: HISCHLER, SAMUEL R
Address: 2420 SE BLACKHORSE ST
City-St-Zip: PORT ST LUCIE, FL 34984

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: SIEGEL, BEATRICE
Address: 7201 PROMONADE DRIVE APT E102
City-St-Zip: BOCA RATON, FL 33433

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

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

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 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: ELISSA L NEILSON

PRES

04/02/2004

Electronic Signature of Signing Officer or Director

Date