2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 01, 2004
Secretary of State

DOCUMENT# K79764

Entity Name: AIROSO CLEANERS, INC.

Current Principal Place of Business:

1335 "B" NW ST LUCIE W BLVD
PORT ST LUCIE, FL 34986 US

New Principal Place of Business:

1335
PORT ST LUCIE, FL 34986 US

Current Mailing Address:

1335 "B" NW ST LUCIE W BLVD
PORT ST LUCIE, FL 34986 US

New Mailing Address:

1335
PORT ST LUCIE, FL 34986 US

FEI Number: 65-0175338 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JOHN B BOUILLON
1335 "B" NW ST LUCIE W BLVD
PORT ST LUCIE, FL 34986 US

Name and Address of New Registered Agent:

JOHN B BOUILLON
1335
PORT ST LUCIE, FL 34986 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: 06/01/2004
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: VSTD ( ) Delete
Name: BELDING, CAROLINE
Address: 8027 PLANTATION LAKE DR
City-St-Zip: PORT ST LUCIE, FL

Title: VD ( ) Delete
Name: BOUILLON, SHIRLEY A.,
Address: 8027 PLANTATION LAKES DR
City-St-Zip: PORT ST LUCIE, FL

Title: PSTD ( ) Delete
Name: BOUILLON, JOHN B
Address: 8027 PLANTATION LAKES DR
City-St-Zip: PORT ST LUCIE, FL

Title: PD ( ) Delete
Name: BOUILLON, JOHN B JR
Address: 8027 PLANTATION LAKES DR.
City-St-Zip: PORT ST. LUCIE, FL 34986

Title: VD ( ) Delete
Name: BOUILLON, THOMAS
Address: 8027 PLANTATION LAKES DR.
City-St-Zip: PORT SAINT LUCIE, FL 34986

Title: VD ( ) Delete
Name: BOUILLON, WILLIWM C
Address: 8027 PLANTATION LAKES DR.
City-St-Zip: PORT SAINT LUCIE, FL 34986

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: JOHN B. BOUILLON PSTD 06/01/2004
Electronic Signature of Signing Officer or Director Date