2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# K79764

Entity Name: AIROSO CLEANERS, INC.

FILED Aug 30, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: FORT PIERCE, FL 34982 LIS **Current Mailing Address: New Mailing Address:** 1335 B ST LUCIE WESTG BLVD PORT SAINT 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: Name and Address of New Registered Agent: JOHN B BOUILLON 1335 B ST LUCIE WEST BLVD PORT ST LUCIE, FL 34986 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition BOUILLON, ROBERT L Name: Name: 8027 PLANTATION LAKES DR Address: Address: City-St-Zip: PORT SAINT LUCIE, FL 34986 City-St-Zip: Title: Title: () Delete (X) Change () Addition Name: BOUILLON, SHIRLEY A. Name: BOUILLON, SHIRLEY A., 8027 PLANTATION LAKES DR 8027 PLANTATION LAKES DR Address: Address: PORT ST LUCIE, FL PORT ST LUCIE, FL 34986 City-St-Zip: City-St-Zip: () Delete Title: (X) Change () Addition Title: **PSTD PSTD** BOUILLON, JOHN B BOUILLON, JOHN B SR Name: Name: 8027 PLANTATION LAKES DR 8027 PLANTATION LAKES DR Address: Address: City-St-Zip: PORT ST LUCIE, FL City-St-Zip: PORT ST LUCIE, FL 34986 Title: PD () Delete Title: VD (X) Change () Addition BOUILLON, JOHN B JR BOUILLON, JOHN B JR Name: Name: Address: 8027 PLANTATION LAKES DR. Address: 8027 PLANTATION LAKES DR. City-St-Zip: City-St-Zip: PORT ST. LUCIE, FL 34986 PORT ST. LUCIE, FL 34986 Title: VSTD Title: () Delete () Change () Addition Name: BELDING, CAROLINE Name: 8027 PLANTATION LAKES DR. Address: Address: City-St-Zip: PORT ST. LUCIE, FL 34986 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: CAROLINE BELDING **VSTD** 08/30/2007