2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 08, 2008
Secretary of State

DOCUMENT# K79764

Entity Name: AIROSO CLEANERS, INC.

Current Principal Place of Business:

2825 S US 1
FORT PIERCE, FL 34982 US

New Principal Place of Business:

Current Mailing Address:

1335 B ST LUCIE WESTG BLVD
PORT SAINT LUCIE, FL 34986 US

New Mailing Address:

1335 B ST LUCIE WEST 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:

JOHN B BOUILLON
1335 B ST LUCIE WEST BLVD
PORT ST LUCIE, FL 34986 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: VD ( ) Delete
Name: BOUILLON, ROBERT L
Address: 8027 PLANTATION LAKES DR
City-St-Zip: PORT SAINT LUCIE, FL 34986

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

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

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

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

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 01/08/2008

Electronic Signature of Signing Officer or Director Date