2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 687511

Entity Name: P.S. CLEARANCE CO., INC.

FILED Sep 01, 2004 Secretary of State

Littly Nan	ile. F.S. C	LEARAINO	L CO., INC.						
Current Principal Place of Business:					New Principal Place of Business:				
8544 NW 6 MIAMI, FL		JS			8407 NW 70TH STREET MIAMI, FL 33166 US				
Current Mailing Address:					New Mailing Address:				
P O BOX 9 NEW HYDI		≣ 11040	US		P O BOX 9 NEW HYDI		Y 11040	US	
FEI Number:	11-2555195	FEI Nu	mber Applied For()	FEI Nun	nber Not Appl	icable ()	Certific	ate of Status De	esired ()
Name and	Address o	f Current	Registered Agent:		Name and	Address o	of New Reg	gistered Age	nt:
C T CORPO 1200 SOUT PLANTATION	TH PINE ISI	ND.	BLUMBERGEXCELSIOR CORPORATE SERVICES, INC. 4435 OLD WINTER GARDEN ROAD ORLANDO, FL 32811 US						
The above in the State		ty submits	this statement for the p	urpose o	f changing it	ts registere	d office or	registered ag	ent, or both,
SIGNATURE: MARC MOEL					09/01/2004				
	Elect	ronic Signa	nture of Registered Age	nt				Date	
			S., the corporation did no	t receive t	he prior notice	e.			
Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS:					ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name: Address: City-St-Zip:	PD ROSENTHA 9671 WEST WESTMINS		l,		Title: Name: Address: City-St-Zip:		() Change	() Addition	
Title: Name: Address: City-St-Zip:	DC MEEHAN, JA 3 PINOAK C OLD BROOK		11563		Title: Name: Address: City-St-Zip:		() Change () Addition		
Title: Name: Address: City-St-Zip:	V () Delete MENUDIER, JOHN C., 15500 SUNSET BLVD. PACIFIC PALISADES, CA 90270				Title: Name: Address: City-St-Zip:		() Change () Addition		
Title: Name: Address: City-St-Zip:	DVT () Delete MADISON, JAMES L., 15 AMALIA LN. : COMMACK, NY				Title: () Change () Addition Name: Address: City-St-Zip:				
Title: Name: Address: City-St-Zip:	DS LOTITO, AN 363 WHITE MINEOLA, N	RD.			Title: Name: Address: City-St-Zip:		() Change	() Addition	
Title:	VS	() Delete			Title [.]	VS	(X) Change	() Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: ROBERT M. VECCHIONE VS 09/01/2004

VECCHIONE, ROBERT M

205 OAK NECK LANE

WEST ISLIP, NY 11795

Name:

Address:

City-St-Zip:

VECCHIONE, ROBERT M

NEW HYDE PARK, NY 11042

3333 NEW HYDE PARK ROAD, SUITE 301

JOHN ALLAN, VICE PRESIDENT 15 GUITTARD ROAD BURLINGAME, CA 94010

KAREN ALLAN, VICE PRESIDENT 15 GUITTARD ROAD BURLINGAME, CA 94010