

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000005110

FILED
Jan 15, 2009
Secretary of State

Entity Name: MODERNISTIC CARPET CLEANING AND RESTORATION COMPANY

Current Principal Place of Business:

821 WAKEFIELD
PLAINWELL, MI 49080

New Principal Place of Business:

Current Mailing Address:

821 WAKEFIELD
PLAINWELL, MI 49080

New Mailing Address:

FEI Number: 38-2630937

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HITOW, LEE
80900 OLD HIGHWAY
ISLA MORADA, FL 33036 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: PRES () Delete
Name: HITOW, LEE
Address: PO BOX 318
City-St-Zip: PLAINWELL, MI 49080

Title: CFO () Delete
Name: COPELAND, JENNIFER
Address: PO BOX 318
City-St-Zip: PLAINWELL, MI 49080

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: HITOW, LEE
Address: 821 WAKEFIELD
City-St-Zip: PLAINWELL, MI 49080

Title: CFO (X) Change () Addition
Name: COPELAND, JENNIFER
Address: 821 WAKEFIELD
City-St-Zip: PLAINWELL, MI 49080

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: JENNIFER COPELAND

CFO

01/15/2009

Electronic Signature of Signing Officer or Director

Date