2007 FOR PROFIT CORPORATION, ANNUAL REPORT

DOCUMENT # F99000002066

1. Entity Name

CLEÁR WORLD COMMUNICATIONS CORPORATION



Principal Place of Business

Mailing Address

3501 S. HARBOR BLVD. ,#100 SANTA ANA, CA 92704 3501 2501 S H

3601 S. HARBOR BLVD., #100

SANTA ANA, CA 92704

FILED Jun 21, 2007 8:00 am Secretary of State

06-21-2007 90021 002 ***550.00



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01092007 No Chg-P CR2E034 (11/05)

33-0806246

4. FEI Number

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

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8. 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. I am familiar with, and accept the obligations of registered agent.		
Signature, typed or printed rame of registered agent and tale.	f applicable (NOTE Registered Agent signature required when reinstating)	DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees	

OFFICERS AND DIRECTORS 10. PCDT HILE MANCUSO, MICHAEL NAME 3604-S-HARBOR-BLVD- 3501 S. Harbor Blvd., STREET ADDRESS CITY-ST-ZIP SANTA ANA, CA 92704 #100 VSD TITLE MANCUSO, JAMES NAME 3601-S. HARBOR BLVD. 3501 S. Harbor Blvd.. STREET ADDRESS CITY-ST-ZIP SANTA ANA, CA 92704 #100 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP HILE NAME STREET ADDRESS CITY-ST-ZiP TITLE NAME STHEET ADDRESS

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with a lattice like empowered.

SIGNATURE:

CITY-ST-ZIP

MATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

James Mancuso, Secretary 6/14/07

(714) 445-3900

Davime Phone #