2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

Feb 15, 2005 8:00 am **Secretary of State** DOCUMENT # G07937 1. Entity Name 02-15-2005 90024 018 ***158.75 RED CARPET CLEANING CO. Principal Place of Business Mailing Address 228 HIBISCUS STREET P.O. BOX 4001 **2000186** SUITE 6 TEQUESTA FL 33469 JUPITER FL 33458 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/04) City & State City & State 4. FEI Number Applied For 59-2237873 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent NEEDLE, RICHARD G 407 LAKEWOOD COURT SC JUPITER FL 33458 for the purpose of changing its registered office or registered agent, or both, in the State of Florida. the obligations of regi SIGNATURE (NOTE Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 \$5.00 May Be 9. Election Campaign Financing After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. TITLE TITLE Change ☐ Addition Delete NEEDLE , RICHARD G NAME NEEDLE, RICHARD G NAME 407 LAKEWOOD COURT 407 LAKEWOOD COURT SC STREET ADDRESS STREET ADDRESS CITY-ST-ZIP JUPITER FL 33458 CITY-ST-ZIP JUPITER TITLE VΡ ☐ Delete TITLE ☐ Addition OLE MARY M AKEWOOD COURT NAME NEDDLE, MARY M NAME 407 LAKEWOOD COURT SE STREET ADDRESS STREET ADDRESS JUPITER FL 33458 CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDHESS CITY - ST - ZIP CITY-ST-ZIP TITLE Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-70F CITY-ST-ZIP ☐ Addition TITLE □ Delete TITLE Change MAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7(P 12. I hereby certify that the information supplied with this filing does not qualify 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 signature shall have the same legal effect as if made under eath; 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 of the corporation or the receiver or trustee empowered to changed, or on an attachment with an address, with all of

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