
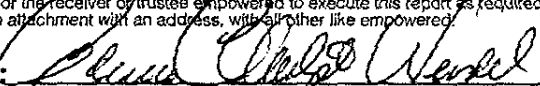


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 15, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # H15301</b> 1. Entity Name <b>CHRISTOPHER'S CARPET CLEANING, INC.</b>		
Principal Place of Business <b>% ADRIAN C. WENDEL</b> <b>7169 154TH RD. NORTH</b> <b>PALM BEACH GARDENS, FL 33418</b>	Mailing Address <b>% ADRIAN C. WENDEL</b> <b>7169 154TH RD. NORTH</b> <b>PALM BEACH GARDENS, FL 33418</b>	
DO NOT WRITE IN THIS SPACE		
<b>6. Name and Address of Current Registered Agent</b>  <b>WENDEL, ADRIAN C.</b> <b>7169 154TH ROAD NORTH</b> <b>PALM BEACH GARDENS, FL 33418</b>		DO NOT WRITE IN THIS SPACE
<b>8.</b> 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>		
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2004 Fee will be \$350.00</b>	<b>9. Election Campaign Financing</b> Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
<b>10. OFFICERS AND DIRECTORS</b>		
TITLE	PST	
NAME	WENDEL, ADRIAN C.	
STREET ADDRESS	7169 154TH ROAD NORTH	
CITY - ST - ZIP	PALM BCH GARDENS FL	
TITLE		
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
<b>12.</b> I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 all other like empowered.		
<b>SIGNATURE:</b> 		01/09/04 (561) 743-8852 <small>Date Daytime Phone #</small>



01092004 No Chg-P CR2E034 (10/03)

4. FEI Number **59-2472625** Applied For ☐ Not Applicable ☐

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

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01/15/04-80050-006 150.00

**DO NOT WRITE IN THIS SPACE**