2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

Feb 10, 2006 8:00 am Secretary of State DOCUMENT # J21056 1. Entity Name 02-10-2006 90022 035 ***150.00 BUDGET CARPET CLEANING, INC. Principal Place of Business Mailing Address 1922 NW 81 AVENUE 1922 NW 81 AVENUE **CORAL SPRINGS FL 33071** CORAL SPRINGS FL 33071 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/05) City & State City & State Applied For 4. FEI Number 59-2691036 Not Applicable Country Ziο Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent IERRY MEYER, TERRY Address (P.O. Box Number is Not Acceptable) 1922 NW 81 AVENUE CORAL SPRINGS FL 33063 Zip Code City CORAC - SPRINGS <u> 7085</u> 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 Signature, typed or printed name of registered agent and title it applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00. . 9. Election Campaign Financing \$5.00 May Be After May 1, 2006 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. ☐ Change Addition TITLE ☐ Delete TITLE NAME NAME MEYER, TERRY STREET ADDRESS 1922 NW 81 AVENUE STREET ADDRESS CITY-ST-ZIP CORAL SPRINGS FL CITY-ST-ZIP ☐ Delete Change ☐ Addition TITLE NAME NAME ARGENT, CHERYL STREET ADDRESS 9103 NW 43 CT STREET ADDRESS CITY - ST- ZIP CITY-ST-ZIP POMPANO BEACH FL 33065 Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME PEARL DENISE STREET ADDRESS STREET ADDRESS 1922 NW 81 AVE CITY-ST-ZIP CITY-ST-ZIP POMPANO BEACH FL 33071 TITLE ☐ Change ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Delete TITLE ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-SI-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 all other like empowered.

FILED