

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K68487

FILED
Jan 14, 2009
Secretary of State

Entity Name: MONTEREY DISCOUNT VACUUM, INC.

Current Principal Place of Business:

514 SE MONTEREY RD
STORE
STUART, FL 34994 US

New Principal Place of Business:

Current Mailing Address:

514 SE MONTEREY RD
STORE
STUART, FL 34994 US

New Mailing Address:

FEI Number: 65-0106511 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

PERANIO, CLIFFORD
514 SE MONTEREY RD
STUART, FL 34994 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: P () Delete
Name: PERANIO, CLIFFORD
Address: 1838 SE GREENDON AVE
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: V () Delete
Name: PERANIO, SUSAN
Address: 1838 SE GREENDON AVE
City-St-Zip: PORT SAINT LUCIE, FL 34952 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: CLIFFORD PERANIO

P

01/14/2009

_____ Electronic Signature of Signing Officer or Director

_____ Date