2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L00000003219

1. Entity Name SPIRIT CLEANERS, LLC



FILED Feb 02, 2007 08:00 AM Secretary of State

Principal Place of Business

6210 N FLORIDA AVE TAMPA, FL 33604 Mailing Address

6210 N FLORIDA AVE TAMPA, FL 33604



01302007 No Chg-LLC

CR2E083 (11/05)

4.	FEI Number
	59-3632750

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

MCNATT, HENRY III 14946 NORTH FLORIDA AVENUE TAMPA, FL 33613

DO NOT WRITE IN THIS SPACE

.,,,,,	2 000.0	IN THIS SPACE
	named entity submits this statement for the purpose of changing ions of registered agent.	g its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept
SIGNATURE.		(NOTE: Registered Agent signature required when reinstating) DATE
Fi D	iling Fee is \$50.00 ue by May 1, 2007	
9.	MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS	MGR MCNATT, HENRY JR.	
CITY-ST-ZIP	6210 N. FLORIDA AVE. TAMPA, FL 33604	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		000000618981 02/08/07-80053-004 50.00
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STREET ADDRESS CITY-ST-ZIP		Page 1 Capa DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME		

11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

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STREET ADDRESS CITY-ST-ZIP

1-30-07 813-231-6992

11-1104 MODIATE TO

Date

Daytime Phone #