2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L05000119160

1. Entity Name

ON THE SPOT DRY CLEANING LLC



FILED Apr 24, 2008 08:00 AN Secretary of State

Principal	Place	of	Business

2785 SW 91 ST

220 JANESVILLE, FL 32608

Mailing Address

3958 NW 29TH LANE GAINESVILLE, FL 32606



01122008 No Chg-LLC

CR2E083 (12/07)

81-0681513	4.	FEI Number
		81-0681513

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6.	Name	and	Address of	Current	Registered	Agent
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HAMILOTHORIS, JOHN A 3958 NW 29TH LANE GAINESVILLE, FL 32606

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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 if applicable

(NOTE: Registered Agent signature required when reinstaling)

DATE

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75

U00000920313 05/14/08-80039-002 143.75

9.	1. C MANAGING MEMBERS/MANAGERS	
'TITLE ,NAME !STREET ADDRESS CITY-ST-ZIP	MGRM HAMILOTHORIS, JOHN A 3958 NW 29TH LANE GAINESVILLE, FL 32606	
TITLE NAME STREET ADDRESS , CITY-ST-ZIP		
TITLE 'NAME 'STREET ADDRESS CITY-ST-ZIP	-	
TITLE NAME ,STREET ADDRESS ;CITY-ST-ZIP		
TITLE , 'NAME' STREET ADDRESS 'CITY-ST-ZIP		
TITLE ' NAME *STREET ADDRESS CITY-ST-ZIP		

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11. I hereby certify that the information supplied with this filing 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.

JOHN A. HAMILOTHORIS

BNATURE: John Geomesthers

4/22/08

350-377-511

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