

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000050482

Entity Name: 60 MINUTE CLEANERS, LLC

FILED
Apr 26, 2008
Secretary of State

Current Principal Place of Business:

1401 ORANGE AVENUE
FORT PIERCE, FL 34950-681 US

New Principal Place of Business:

Current Mailing Address:

1401 ORANGE AVENUE
FORT PIERCE, FL 34950 US

New Mailing Address:

FEI Number: 06-1778180

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

IMPERATORE, DEBORAH L
104 SW PEACOCK BLVD
205
PORT ST LUCIE, FL 34986 US

Name and Address of New Registered Agent:

IMPERATORE, DEBORAH L
5600 NW SCEPTER DR
PORT ST LUCIE, FL 34983 US

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:

04/26/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: IMPERATORE, DEBORAH L
Address: 104 SW PEACOCK BLVD APT 205
City-St-Zip: PORT ST LUCIE, FL 34986 US

Title: MGRM () Delete
Name: IMPERATORE, JOSEPH
Address: 104 SW PEACOCK BLVD. APT 205
City-St-Zip: PORT ST LUCIE, FL 34986 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: IMPERATORE, DEBORAH L
Address: 5600 NW SCEPTER DR
City-St-Zip: PORT ST LUCIE, FL 34983 US

Title: MGRM (X) Change () Addition
Name: IMPERATORE, JOSEPH
Address: 5600 NW SCEPTER DR
City-St-Zip: PORT ST LUCIE, FL 34983 US

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 is true and accurate and that my electronic 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.

SIGNATURE: DEBORAH IMPERATORE

MGMB

04/26/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date