## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## **FILED** DOCUMENT # P01000026877 Jul 12, 2007 08:00 AM 1. Entity Name **Secretary of State** BELLA CARPET CLEANERS, INC. Principal Place of Business Mailing Address 13765 FOX GLOVE STREET 13765 FOX GLOVE STREET WINTER GARDEN, FL 34787 WINTER GARDEN, FL 34787 07032007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3706344 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent FRANKETTI, LEE DO NOT WRITE 1376 FOX GLOVE STREET WINTER GARDEN, FL 34787 IN THIS SPACE 3. 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. 7/2/07 Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) \$5.00 May Be. 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. corporation did not receive the prior notice. Due by September 14, 2007 Added to Fees OFFICERS AND DIRECTORS 10. DΡ TITLE NAME FRANKETTI, LEE U00000768291 07/12/07-80002-016 150.00 STREET ADDRESS 13765 FOX GLOVE STREET WINTER GARDEN, FL 34787 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

12. 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 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.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR