2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000039528

MOORE, GAIL B

1270 PHEASANT RUN TRAIL

MIDDLEBURG, FL 32068 US

Name:

Address:

City-St-Zip:

Entity Name: CLEANCO ENTERPRISES, INC.

FILED Apr 23, 2007 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
1270 PHEASANT RUN TRAIL MIDDLEBURG, FL 32068			5039 SAN JUAN AVENUE JACKSONVILLE, FL 32210	
Current M	lailing Addre	ss:	New Mailing Addres	s:
	ASANT RUN URG, FL 320			
FEI Number	: 59-3716331	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:	
MIDDLEBUTHE above	ASANT RUN URG, FL 320 named entity e of Florida.	68 US	purpose of changing its registere	ed office or registered agent, or both,
SIGNATU				
Electronic Signature of Registered Age			ent	 Date
Election Car	mpaign Financir	ng Trust Fund Contribution ().		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	MOORE, STE	NT RUN TRAIL	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	MOORE, GAIL	NT RUN TRAIL	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	MOORE, STE 1270 PHEASA) Delete PHEN T .NT RUN TRAIL 6, FL 32068 US	Title: Name: Address: City-St-Zip:	() Change () Addition
Title:	VP () Delete	Title:	() Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: GAIL B. MOORE VP 04/23/2007