

ANNUAL REPORT

FI

Feb 28, 20

Secret

DOCUMENT # P01000109811

1. Entity Name
MR. PRESSURE CLEANING INC.

Principal Place of Business

2721 WEST 74 STREET
HIALEAH, FL 33016

Mailing Address

2721 WEST 74 STREET
HIALEAH, FL 33016

01232004 No Chg-P CR2E034 (10/03)

4. FEI Number
65-1153095Applied For
Not Applicable5. Certificate of Status Desired ☐\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

ZERON, JOSE
2721 WEST 74 STREET
HIALEAH, FL 33016DO NOT WRITE
IN THIS SPACE

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 reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.009. Election Campaign Financing
Trust Fund Contribution. ☐\$5.00 May Be
Added to Fees000000071038
03/01/04-80055-005 150.00

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
PD	ZERON, JOSE	2721 WEST 74 STREET	HIALEAH, FL 33016

DO NOT WRITE
IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Jose Zeron. 2-18-04 786 251 4419.