

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000000626

Entity Name: EXCELLENT CLEAN, INC.

FILED  
Apr 29, 2004  
Secretary of State

**Current Principal Place of Business:**

9871 CITADEL LN., STE. 102  
BONITA SPRINGS, FL 34135

**New Principal Place of Business:**

P.O. BOX 2522  
BONITA SPRINGS, FL 34133

**Current Mailing Address:**

PO BOX 323  
BONITA SPRINGS, FL 34133

**New Mailing Address:**

PO BOX 2522  
BONITA SPRINGS, FL 34133

FEI Number: 80-0024703

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SPIEGEL & UTRERA, P.A.  
1840 SW 22 ST., 4TH FL  
MIAMI, FL 33145 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DPST ( ) Delete  
Name: BLONDIN, DEBORAH A  
Address: 9871 CITADEL LN., STE. 102  
City-St-Zip: BONITA SPRINGS, FL 34135

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DPST (X) Change ( ) Addition  
Name: EQUITZ, DEBORAH A  
Address: P.O. BOX 2522  
City-St-Zip: BONITA SPRINGS, FL 34133

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

SIGNATURE: DEBORAH EQUITZ

DPST

04/29/2004

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date