

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000013259

Entity Name: CLEANER'S LEADER, INC.

FILED
Apr 30, 2008
Secretary of State

Current Principal Place of Business:

13808 SW 8 ST
MIAMI, FL 33184

New Principal Place of Business:

Current Mailing Address:

13808 SW 8 ST
MIAMI, FL 33184

New Mailing Address:

FEI Number: 04-3601511

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MESA, MANUEL ARTHUR ESQ.
2441 NW 93 AVE
SUITE 101
MIAMI, FL 33172 US

Name and Address of New Registered Agent:

MESA, MANUEL ARTHUR ESQ.
730NW 107TH AV.
SUITE 115
MIAMI, FL 33172 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: MANUEL A. MESA

04/30/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GOMEZ, ENRIQUE
Address: 918 WINDWARD WAY
City-St-Zip: WESTON, FL 33327

Title: D () Delete
Name: OLAIZOLA, GUILLERMO
Address: 918 WINDWARD WAY
City-St-Zip: WESTON, FL 33327

Title: D () Delete
Name: DELGADO, CARMEN
Address: 918 WINDWARD WAY
City-St-Zip: WESTON, FL 33327

Title: D () Delete
Name: MEILAN, JOSE L
Address: 918 WINDWARD WAY
City-St-Zip: WESTON, FL 33327

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: ENRIQUE A. GOMEZ

P

04/30/2008

Electronic Signature of Signing Officer or Director

Date