## 2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# P02000030992

Entity Name: CLERTECH.COM, INC.

FILED Oct 12, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3500 N STATE ROAD 7 1844 N NOB HILL RD

LAUDEDALE LAKES, FL 33319 SUITE 616

PLANTATION, FL 33322

Current Mailing Address: New Mailing Address:

3500 N STATE ROAD 7 1844 N NOB HILL RD

LAUDEDALE LAKES, FL 33319 SUITE 616

PLANTATION, FL 33322

FEI Number: 30-0080098 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:

CLERTECH GROUP,INC 1844 N NOB HILL RD

SUITE 616

PLANTATION, FL 33322 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: MANETIRONY CLERVRAIN 10/12/2008

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST () Delete Title: PST (X) Change () Addition
Name: CLERVRAIN, MANETIRONY Name: CLERVRAIN, MANETIRONY
Address: 3500 N STATE ROAD 7 Address: 1844 N NOB HILL RD

City-St-Zip: LAUDERDALE LAKES, FL 33319 City-St-Zip: PLANTATION, FL 33322

Title: VP () Delete Title: VP (X) Change () Addition

 Name:
 CLERVRAIN, ROODE A

 Address:
 3500 N STATE ROAD 7
 Address:
 1844 N NOB HILL RD

 City-St-Zip:
 LAUDERDALE LAKES, FL 33319
 City-St-Zip:
 PLANTATION, FL 33322

Title: D (X) Delete Title: ( ) Change ( ) Addition

 Name:
 ACHILLE, LEON T
 Name:

 Address:
 4042 SW 69TH TERRACE
 Address:

 City-St-Zip:
 MIRAMAR, FL 33023
 City-St-Zip:

Title: D (X) Delete Title: ( ) Change ( ) Addition

 Name:
 MICHAUD, GUSTAVE M
 Name:

 Address:
 276 BENSON STREET
 Address:

 City-St-Zip:
 NAPLES, FL 34113
 City-St-Zip:

Title: D (X) Delete Title: ( ) Change ( ) Addition

 Name:
 GUILLAUME, MICHEL
 Name:

 Address:
 12525 NE 13TH AVE
 Address:

 City-St-Zip:
 NORTH MIAMI, FL 33161
 City-St-Zip:

Title: D (X) Delete Title: ( ) Change ( ) Addition

 Name:
 CADET, PROVIDENCE
 Name:

 Address:
 4154 NW 12TH TERRACE
 Address:

 City-St-Zip:
 FORT LAUDERDALE LAKES, FL 33309
 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: MANETIRONY CLERVRAIN CEO 10/12/2008

Electronic Signature of Signing Officer or Director

Date