

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000054037

Entity Name: MAGIC CLEAN, INC.

FILED
Apr 30, 2007
Secretary of State

Current Principal Place of Business:

6973 STONEY CREEK CIRCLE
LAKE WORTH, FL 33467 US

New Principal Place of Business:

3244 W CAT CAY ROAD
LANTANA, FL 33462 US

Current Mailing Address:

6973 STONEY CREEK CIRCLE
LAKE WORTH, FL 33467 US

New Mailing Address:

3244 W CAT CAY ROAD
LANTANA, FL 33462 US

FEI Number: 02-0603306

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JAFFE, LINDA M
700 SOUTH ANDREWS AVE
FT. LAUDERDALE, FL 33316 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: PD () Delete
Name: MELARA, MAURICIO
Address: P.O.BOX 772316
City-St-Zip: CORAL SPRINGS, FL 33077 US

Title: VP () Delete
Name: MARGARITA, MELARA
Address: P.O.BOX 772316
City-St-Zip: CORAL SPRINGS, FL 33077 US

Title: HR () Delete
Name: SINEWITZ, GAYLE M
Address: 6973 STONEY CREEK CIRCLE
City-St-Zip: LAKE WORTH, FL 33467

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: HR (X) Change () Addition
Name: ROMINA, UMBRE
Address: 3244 W CAT CAY ROAD
City-St-Zip: LANTANA, FL 33462

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: MAURICIO MELARA

PD

04/30/2007

Electronic Signature of Signing Officer or Director

Date