


**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

2/9

**FILED**  
**Mar 06, 2006 8:00 am**  
**Secretary of State**

02-09-2006 90041 047 \*\*\*100.00  
03-06-2006 90013 010 \*\*\*\*58.75

<b>DOCUMENT # P02000095134</b>		
1. Entity Name <b>CLEANX, INC.</b>		
Principal Place of Business <b>19810 W DIXIE HWY NORTH MIAMI, FL 33180</b>		Mailing Address <b>19810 W DIXIE HWY NORTH MIAMI, FL 33180</b>
<b>DO NOT WRITE IN THIS SPACE</b>		
6. Name and Address of Current Registered Agent <b>LISS, MITCHELL 19810 W DIXIE HWY NORTH MIAMI, FL 33180</b>		<b>DO NOT WRITE IN THIS SPACE</b>
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 _____ (NOTE: Registered Agent signature required when renouncing) DATE _____		
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
<b>10. OFFICERS AND DIRECTORS</b>		<b>DO NOT WRITE IN THIS SPACE</b>
TITLE	D	
NAME	LISS, MITCHELL	
STREET ADDRESS	19810 W DIXIE HWY	
CITY-ST-ZIP	NORTH MIAMI, FL 33180	
TITLE	D	
NAME	BATTAGLIA, JOHN	
STREET ADDRESS	19810 W DIXIE HWY	
CITY-ST-ZIP	NORTH MIAMI, FL 33180	
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.		
<b>SIGNATURE:</b> _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date <b>17/10/06</b> Daytime Phone # _____



ATTACHMENT

40024567

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 10, 2006

CLEANX, INC.  
19810 W DIXIE HWY  
NORTH MIAMI, FL 33180

Subject: CLEANX, INC.

Reference Number: P02000095134

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$100.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

The fee to file the enclosed profit annual report/uniform business report is \$150.00. If a certificate of status is desired, please add an additional \$8.75.

There is a balance due of \$50.00.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/rm

ANNUAL REPORTS SECTION