## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000115391

Entity Name: MANAGED ADVANCED CLEANING, CORP

FILED May 02, 2007 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
PO BOX 521381 LONGWOOD, FL 32752			163 PARSONS ROAD LONGWOOD, FL 32779		
Current Mailing Address:			New Mailing Address	New Mailing Address:	
PO BOX 521381 LONGWOOD, FL 32752			163 PARSONS ROAD LONGWOOD, FL 32779		
FEI Numbei	r: 11-3659611	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	d Address of C	urrent Registered Agent:	Name and Address of	f New Registered Agent:	
163 PARS LONGWC	FURTH, KARL J SONS ROAD OOD, FL 32779	US			
	e named entity s te of Florida.	ubmits this statement for the	purpose of changing its registere	d office or registered agent, or both,	
SIGNATU					
	Electron	ic Signature of Registered Ag	ent	Date	
		8(2)(b), F.S., the corporation did n Trust Fund Contribution ( ).	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	WIPPERFURTH 163 PARSONS	ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () WIPPERFURTH	Delete	Title: Name:		
Oity Ot Zip.	163 PARSONS LONGWOOD, F	ROAD	Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	LONGWOOD, F	ROAD L 32779 Delete , ROBYN C ROAD	Address:	( ) Change ( ) Addition ( ) Change ( ) Addition	

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.

City-St-Zip:

SIGNATURE: KARL J WIPPERFURTH PRES 05/02/2007

LONGWOOD, FL 32779

City-St-Zip: