

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000031726

Entity Name: BEST CARPET CLEANING, INC.

FILED  
Feb 11, 2008  
Secretary of State

**Current Principal Place of Business:**

410 CAPEHART DRIVE  
ORLANDO, FL 32822

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 720536  
ORLANDO, FL 32872

**New Mailing Address:**

FEI Number: 57-1157740      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ELSAYED, AZMY S  
410 CAPEHART DRIVE  
ORLANDO, FL 32822 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: V ( ) Delete  
Name: ELSAYED, AZMY  
Address: 410 CAPEHART DR  
City-St-Zip: ORLANDO, FL 32822

Title: P ( ) Delete  
Name: ELSAYED, NAJLAA  
Address: 410 CAPEHART DR  
City-St-Zip: ORLANDO, FL 32822

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: V (X) Change ( ) Addition  
Name: ELSAYED, AZMY S  
Address: 410 CAPEHART DR  
City-St-Zip: ORLANDO, FL 32822

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: AZMY ELSAYED

V

02/11/2008

Electronic Signature of Signing Officer or Director

Date