


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 08, 2007 8:00 am
Secretary of State

03-08-2007 90021 017 ***150.00

DOCUMENT # P03000048705 1. Entity Name NEW LOOK CLEANERS, INC.	
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Principal Place of Business 6100 SW 7TH ST MARGATE, FL 33068 US	Mailing Address 6100 SW 7TH ST MARGATE, FL 33068 US
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DO NOT WRITE IN THIS SPACE



02232007 No Chg-P CR2E034 (11/05)

4. FEI Number 11-3687253	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent JOSEPH. RODRIGUE 2790 SOMMERSET DR # 401 FORT LAUDERDALE, FL 33311	<i>Joseph Rodrigue</i> <i>8000 HAMPTON BLVD</i> <i>#206 N. LAUD FL 33068</i>
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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 reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P JOSEPH. RODRIGUE 2790 SOMMERSET DR. # Q 401 LAUDERDALE LAKES, FL 33311
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<i>Joseph Rodrigue</i>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<i>8000 HAMPTON BLVD #206</i> <i>N. LAUD FL 33068</i>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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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.

SIGNATURE: *X Rodrigue Joseph* *X 2-24-07X*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #