



2004 FOR PROFIT CORPORATION ANNUAL REPORT

9/23/2004 90002-029 \$150.00-\$150.00

04 OCT 11 PM 1:45
CLERK OF STATE
DIVISION OF CORPORATION

DOCUMENT # P03000097006					
1. Entity Name H-CLEER AUTO ELECTRIC INC.					
Principal Place of Business 116 SE 4 ST APT 29 HALLANDALE BEACH, FL 33009			Mailing Address 116 SE 4 ST APT 29 HALLANDALE BEACH, FL 33009		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country	Zip		Country
6. Name and Address of Current Registered Agent CLEER, HENRY 116 SE 4 ST APT 29 HALLANDALE BEACH, FL 33009				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 re-registering) DATE _____					
FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS					
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP		
P	CLEER, HENRY	116 SE 4 ST APT 29	HALLANDALE BEACH, FL 33009		
V	SMITH, LUIS R	116 SE 4 ST APT 29	HALLANDALE BEACH, FL 33009		
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11					
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: 				Date: 09/11/2004 Daytime Phone #	