

## **2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P03000100758

**FILED**  
**Sep 22, 2008**  
**Secretary of State**

**Entity Name:** AMERICAN DREAM PRESSURE CLEANING & MAINTENANCE, INC.

**Current Principal Place of Business:**

4777 NW 103RD AVENUE  
BAY 27  
SUNRISE, FL 33351

**New Principal Place of Business:**

4777 NW 103RD AVENUE  
BAY 27  
SUNRISE, FL 33319

**Current Mailing Address:**

5736 TUSCANY TERRACE  
TAMARAC, FL 33321

**New Mailing Address:**

**FEI Number:** 06-1708188

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MCCOMB, JAMES  
5736 TUSCANY TERRACE  
TAMARAC, FL 33321 US

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

MCCOMB, JAMES G SR  
5736 TUSCANY TERRACE  
TAMARAC, FL 33321 US

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: EILEEN S MCCOMB

09/22/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: MCCOMB, JAMES  
Address: 5736 TUSCANY TERRACE  
City-St-Zip: TAMARAC, FL 33321

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

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

Title: D (X) Change ( ) Addition  
Name: MCCOMB, JAMES G SR  
Address: 5736 TUSCANY TERRACE  
City-St-Zip: TAMARAC, FL 33321

Title: D ( ) Change (X) Addition  
Name: MCCOMB, EILEEN S  
Address: 120 NE 2ND STREET  
City-St-Zip: WILLISTON, FL 32696

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: EILEEN S. MCCOMB

D

09/22/2008

Electronic Signature of Signing Officer or Director

Date