FILED 2005 FOR PROFIT CORPORATION ANNUAL REPORT Jan 31, 2005 08:00 AM Secretary of State DOCUMENT # P03000118741 1. Entity Name STAN'S PRESSURE CLEANING, INC. Principal Place of Business Mailing Address 3120 JAVA PLUM AVENUE P.O. BOX 15054 SARASOTA, FL 34232 SARASOTA, FL 34277 01252005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-0311404 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent LABADY, STANLEY E DO NOT WRITE 3120 JAVA PLUM AVENUE SARASOTA, FL 34232 IN THIS SPACE 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. ! am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) U00000205637 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 01/31/05-80052-014 150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE LABADY, STANLEY E STREET ADDRESS 3120 JAVA PLUM AVENUE CITY-ST-ZIP SARASOTA, FL 34232 TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE MAME STREET ADDRESS CITY-ST-ZIP TITLE

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f). 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 appeter like empowered.

NAME STREET ADDRESS CITY-ST-ZIP

> STANLEY E. LAPADY AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR