


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 18, 2006 08:00 AM
Secretary of State

DOCUMENT # P03000147682
 1. Entity Name
 IVAN PRESSURE CLEANING CORP.



Principal Place of Business 1761 NW 46TH AVE # D312 LAUDERHILL, FL 33313	Mailing Address 1761 NW 46TH AVE # D312 LAUDERHILL, FL 33313
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01132006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-0558932	Applied For Not Applicable
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5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

KARAN, JULIAN I PD
 1761 NW 46TH AVE # D312
 LAUDERHILL, FL 33313

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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 _____
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD KARAN, JULIAN IVAN 1761 NW 46TH AVE # D312 LAUDERHILL, FL 33313
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 01/23/06-80022-007 150.00

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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: Julian Ivan Karan - 1-14-06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR _____ Date _____ Daytime Phone # _____