

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Aug 04, 2006 08:00 AM
Secretary of State

DOCUMENT # P04000026650

1. Entity Name

MARTIN'S PRESSURE CLEANING, INC.



Principal Place of Business

**3064 54TH ST SW
NAPLES, FL 34116 US**

Mailing Address

**P.O. BOX 990966
NAPLES, FL 34117 US**



05082006

No Chg-P

CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number

20-0713713

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**MARTIN, STEPHEN
3064 54TH ST SW
NAPLES, FL 34116**

**DO NOT WRITE
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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Stephen Martin

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

(NOTE: Registered Agent signature required when reinstating)

000000513713
08/04/06-2008-01-150.00
5/8/06

DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 6, 2006**

**9. Election Campaign Financing
Trust Fund Contribution.** ☐

**\$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	P
NAME	MARTIN, STEPHEN
STREET ADDRESS	3064 54TH STREET SW
CITY-ST-ZIP	NAPLES, FL 34116
TITLE	VP
NAME	MARTIN, GAIL
STREET ADDRESS	3064 54TH ST SW
CITY-ST-ZIP	NAPLES, FL 34116
TITLE	S
NAME	MARTIN, DENNIS
STREET ADDRESS	4265 22ND AVE. NE
CITY-ST-ZIP	NAPLES, FL 34120
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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 employees.

SIGNATURE:

Stephen Martin

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

5/8/06 239-289 5529