2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000031525

1. Entity Name
SHARPCLEANING, INC.

Principal Place of Business	Mailing Address
15 UTILITY DR.	15 UTILITY DR.
PALM COAST, FL 32164	PALM COAST, FL 32164

DO NOT WRITE IN THIS SPACE

02062007   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
56-2436055	Not Applicable

5. Certificate of Status Desired ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

PIRES, EDITE M
66 PICKERING DRIVE
PALM COAST, FL 32164

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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 _____

Signature, typed or printed name of registered agent and title if applicable   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00	**9.** Election Campaign Financing Trust Fund Contribution. ☐	**$5.00** May Be Added to Fees
After May 1, 2007 Fee will be $550.00		

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	PIRES, EDITE M
STREET ADDRESS	66 PICKERING DR
CITY-ST-ZIP	PALM COAST, FL 32164

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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02/28/07-80013-005 150.00

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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: _____   03-15-07

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #