2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000034203

Entity Name

A BRITE WAY CLEANING, INC.

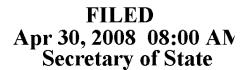


Principal Place of Business

684 SABAL PALM CIRCLE ALTAMONTE SPRINGS, FL 32701 Mailing Address

684 SABAL PALM CIRCLE

ALTAMONTE SPRINGS, FL 32701





04242008

No Chg-P

CR2E034 (11/05)

4. FEI Number 20-0849341 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ANDERSON, KATHLEEN S 311 ALTAMONTE COMMERCE BLVD SUITE 1612 ALTAMONTE SPRINGS, FL 32714

DO NOT WRITE

 The above named entity submits this statement for the purpose of the the obligations of registered agent. 	langing its registered office or registered agent, or bo	ith, in the State of Florida. I am familiar with, and accept
SIGNATURE	(NOTE Registered Agent signature required when reinstating)	DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS TITLE SZATKOWSKI, SLAWOMIR NAME STREET ADDRESS 684 SABAL PALM CIRCLE CITY-ST-ZIP ALTAMONTE SPRINGS, FL 32701 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 empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/08

Daytime Phone #