


**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Aug 29, 2008 8:00 am**  
**Secretary of State**

08-29-2008 90002 026 \*\*\*158.75

<b>DOCUMENT # P04000098045</b> 1. Entity Name WE CLEAN 4-U, INC.			
Principal Place of Business 6875 82 AVE NORTH PINELLAS PARK, FL 33781 US		Mailing Address 6875 82 AVE NORTH PINELLAS PARK, FL 33781 US	
2. Principal Place of Business - No P.O. Box # <i>Resident 6875 82 Ave N</i>		3. Mailing Address <i>16875 82 Ave N</i>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State <i>Pinellas Park FL</i>		City & State <i>Pinellas Park FL</i>	
4. FEI Number 61-1472696		Applied For Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent ACEVEDO, MIGDALIA 5881 63RD TERRACE NORTH PINELLAS PARK, FL 33781		7. Name and Address of New Registered Agent Name: <i>NA</i> Street Address (P.O. Box Number is Not Acceptable): City: <b>FL</b> Zip Code:	
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: <i>Migdalia Acevedo</i> Signature, typed or printed name of registered agent, and title if applicable.		DATE: <i>8/25/8</i> (NOTE: Registered Agent signature required when reinstating)	
<b>FILE NOW!!! FEE IS \$150.00 Due by September 12, 2008</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.			
<b>10. OFFICERS AND DIRECTORS</b>		<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>	
TITLE: P NAME: ACEVEDO, MIGDALIA STREET ADDRESS: 5881 63RD TERRACE NORTH CITY-ST-ZIP: PINELLAS PARK, FL 33781	<input type="checkbox"/> Delete	TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: SEC NAME: LUNA, MILAGROS STREET ADDRESS: 5881 63RD TERRACE NORTH CITY-ST-ZIP: PINELLAS PARK, FL 33781	<input type="checkbox"/> Delete	TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: T NAME: RIOS, ELIYA STREET ADDRESS: 5881 63RD TERRACE NORTH CITY-ST-ZIP: PINELLAS PARK, FL 33781	<input type="checkbox"/> Delete	TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	<input type="checkbox"/> Delete	TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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: <i>Migdalia Acevedo</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		DATE: <i>8/25/8</i> Date Daytime Phone #	