## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000159562

City-St-Zip:

PEMBROKE PINES, FL 33029

Entity Name: FEGA AMERICLEAN, INC.

FILED Apr 26, 2007 Secretary of State

Current P	rincipal Plac	e of Business:	New Prince	New Principal Place of Business:			
19620 PINI 110 PEMBROK	ES BLVD. (E PINES, FL	33029					
Current Mailing Address:			New Mail	New Mailing Address:			
16592 NW PEMBROK	16 ST KE PINES, FL	33028					
FEI Number:	: 20-1926299	FEI Number Applied For ( )	FEI Number Not App	licable ( )	Certificate of Status Des	sired ( )	
Name and Address of Current Registered Agent:			Name and	Name and Address of New Registered Agent:			
GARCIA, N 19620 PNE 110 PEMBROK		33029 US					
	named entity e of Florida.	submits this statement for the	purpose of changing	its registered c	office or registered age	nt, or both,	
SIGNATUR	RE:						
Electronic Signature of Registered Agent			gent	Date			
Election Car	npaign Financir	ng Trust Fund Contribution ( ).					
OFFICERS	S AND DIREC	CTORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	GARCIA, MIRI. 19620 PINES	) Delete AM M BLVD. SUITE 110 INES, FL 33029	Title: Name: Address: City-St-Zip:	GARCIA, MIRIA 19620 PINES E	) Change () Addition MM M BLVD. SUITE 110 NES, FL 33029		
Title: Name: Address: City-St-Zip:	GARCIA, MIRI 19620 PINES	() Delete AM M BLVD, SUITE 110 PINES, FL 33029	Title: Name: Address: City-St-Zip:		) Change ()Addition		
Title: Name: Address:	MARTIN, ANĜI	() Delete ELA BLVD, SUITE 110	Title: Name: Address:	C	) Change ()Addition		

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: MIRIAM M. GARCIA P 04/26/2007