2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000165390

1. Entity Name

INNOVATIVE CLEANING CONCEPTS, INC.



FILED May 02, 2006 08:00 AN Secretary of State

Principal Place of Business

1497 MAIN STREET

1731 H

SIGNATURE

DUNEDIN, FL 34698

Mailing Address

1497 MAIN STREET

361

DUNEDIN, FL 34698



04172006 No Chg-P CR2E034 (11/05)

FEI Number
 20-1983019

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

- NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

PFEIFER, JESSICA
625 WILKIE STREET

DUNEDIN, FL 34698

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.

(NOTE Registered Agent signature required when reinstalling)

FILE NOW!!! FEE IS \$150.00 . After May 1, 2006 Fee will be \$550.00

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

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

10. OFFICERS AND DIRECTORS TITLE NAME PFEIFER, JESSICA STREET ADDRESS 625 WILKIE STREET CITY-ST-ZIP DUNEDIN, FL 34698 000000557955 05/17/06-80076-006 158.75 VΡ TITLE WEINTRAUB, ADAM NAME 921 WOODLAND DRIVE STREET ADDRESS CITY-ST-ZIP PALM HARBOR, FL 34683 TITLE NAME STREET ADDRESS 7.27 33 **34.49 [] [** CITY-ST-ZIP THE SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS TITLE STREET ADDRESS CITY-ST-ZIP

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

ASIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04117/de

727-409-6781

Daytime Phone #