2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 11, 2008
Secretary of State

DOCUMENT# P04000166733

Entity Name: STEAM ALL CARPET CARE & RESTORATION INC.

Current Principal Place of Business:

165 FLORIDA PARK DRIVE N.
PALM COAST, FL 32137

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 352477
PALM COAST, FL 32135

New Mailing Address:

FEI Number: 33-1107364 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CICCIMARRO, STEPHANIE
165 FLORIDA PARK DRIVE N.
PALM COAST, FL 32137 US

Name and Address of New Registered Agent:

CICCIMARRO, STEFANIE
165 FLORIDA PARK DRIVE N.
PALM COAST, FL 32137 US

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.

SIGNATURE: STEFANIE CICCIMARRO 01/11/2008
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PTSV ( ) Delete
Name: CICCIMARRO, STEPHANIE
Address: 165 FLORIDA PARK DRIVE N.
City-St-Zip: PALM COAST, FL 32137

Title: DCM ( ) Delete
Name: CICCIMARRO, STEFANIE
Address: 165 FLORIDA PARK DRIVE N.
City-St-Zip: PALM COAST, FL 32137

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTSV (X) Change ( ) Addition
Name: CICCIMARRO, STEFANIE
Address: 165 FLORIDA PARK DRIVE NORTH
City-St-Zip: PALM COAST, FL 32137

Title: DCM (X) Change ( ) Addition
Name: FINN, JAMES C
Address: 165 FLORIDA PARK DRIVE N.
City-St-Zip: PALM COAST, FL 32137

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.

SIGNATURE: STEFANIE CICCIMARRO PTSV 01/11/2008
Electronic Signature of Signing Officer or Director Date