

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000079746

FILED
Aug 15, 2007
Secretary of State

Entity Name: EXCLUSIVE AUTO DETAILING CORP.

Current Principal Place of Business:

6844 SW 20 STREET
MIRAMAR, FL 33023

New Principal Place of Business:

4303 GREENBRIAR LANE
WESTON, FL 33331

Current Mailing Address:

6844 SW 20 STREET
MIRAMAR, FL 33023

New Mailing Address:

4303 GREENBRIAR LANE
WESTON, FL 33331

FEI Number: 55-0898112

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

VALDES, PAULINE
6844 SW 20 STREET
MIRAMAR, FL 33023 US

Name and Address of New Registered Agent:

VALDES, PAULINE
4303 GREENBRIAR LANE
WESTON, FL 33331 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: PAULINE VALDES

08/15/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: CERVERA, RICARDO
Address: 6844 SW 20 STREET
City-St-Zip: MIRAMAR, FL 33023

Title: DVST () Delete
Name: VALDES, PAULINE
Address: 6844 SW 20 STREET
City-St-Zip: MIRAMAR, FL 33023

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: CERVERA, RICARDO
Address: 4303 GREEN BRIAR LANE
City-St-Zip: WESTON, FL 33331

Title: DVST (X) Change () Addition
Name: VALDES, PAULINE
Address: 4303 GREENBRIAR LANE
City-St-Zip: WESTON, FL 33331

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: PAULINE VALDES

DVST

08/15/2007

Electronic Signature of Signing Officer or Director

Date