

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000106646

FILED  
Apr 20, 2009  
Secretary of State

**Entity Name:** NEW STAR MOBILE CARPET CLEANING, INC.

**Current Principal Place of Business:**

238 SAN REMO BLVD  
NORTH LAUDERDALE, FL 330683944

**New Principal Place of Business:**

7819 NW 40 CT  
CORAL SPRINGS, FL 33065

**Current Mailing Address:**

238 SAN REMO BLVD  
NORTH LAUDERDALE, FL 330683944

**New Mailing Address:**

7819 NW 40 CT  
CORAL SPRINGS, FL 33065

**FEI Number:** 20-3336381

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

JOSEPH, LECLERC  
238 SAN REMO BLVD  
NORTH LAUDERDALE, FL 330683944 US

**Name and Address of New Registered Agent:**

JOSEPH, LECLERC  
7819 NW 40CT  
CORAL SPRINGS, FL 33065 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:

04/20/2009

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: JOSEPH, LECLERC  
Address: 238 SAN REMO BLVD  
City-St-Zip: NORTH LAUDERDALE, FL 330683944

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: JOSEPH, LECLERC  
Address: 7819 NW 40CT  
City-St-Zip: CORAL SPRINGS, FL 33065

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: LECLERC JOSEPH

PD

04/20/2009

Electronic Signature of Signing Officer or Director

Date