2006 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)** 

SIGNATURE

## Mar 08, 2006 8:00 am Secretary of State **DOCUMENT # P05000151725** 02-17-2006 90083 031 \*\*\*150.00 1. Entity Name CLEAN-N-UP, INC. Principal Place of Business Mailing Address 1 HIGH POINT CIRCLE WEST, #306 NAPLES FL 34103 PO BOX 8598 NAPLES FL 34101 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apr. #, etc. 1st MOORE CR2E034 (10/05) City & State City & State 4. FEI Number Applied For 20-3750408 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name LONGO, THOMAS R Street Address (P.O. Box Number is Not Acceptable) 1 HIGH POINT CIRCLE WEST, #306 NAPLES FL 34103 City Zip Code 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: Registored Agent signature nationed when invisibling) FILE NOW!!! FEE IS \$150.00 \$5.00 May Be 9. Election Campaign Financing After May 1, 2006 Fee Will Be \$550.00 Trust Fund Contribution, Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. ☐ Change ☐ Addition BILE ☐ Delete TITLE LONGO, THOMAS R NAME NAME STREET ADDRESS STREET ADDRESS 1 HIGH POINT CIRCLE WEST, #306 CITY-ST-ZIP CITY-S1-ZIP NAPLES FL 34103 TITLE Detete TIFLE Change Addition STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY - ST - 71P Delete TITLE \_\_\_\_Crange\_\_ Addition DITE NAME NAME STREET ADDRESS STREET ADDRESS CITY ST ZIP CITY - ST - ZIP .... TITLE Delete TITLE ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS City-ST-ZIP CITY-ST-ZIP Delete ■ Addition TITLE TITLE NAME MAINE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Chance ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 logexecute this report as equirely 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 observation empowered.

**FILED** 



February 21, 2006

CLEAN-N-UP, INC. PO BOX 8598 NAPLES, FL 34101

Subject: CLEAN-N-UP, INC.

Reference Number:

P05000151725

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/MH ANNUAL REPORTS SECTION