

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000112478

Entity Name: EVERCLEAN GROUP INC.

FILED
Apr 28, 2008
Secretary of State

Current Principal Place of Business:

4241 BAYMEADOWS ROAD
SUITE 10
JACKSONVILLE, FL 32217 US

Current Mailing Address:

1510 SILVER OAK LANE
JACKSONVILLE, FL 32223 US

New Principal Place of Business:

4541 ST. AUGUSTINE ROAD
SUITE 7
JACKSONVILLE, FL 32207 US

New Mailing Address:

4541 ST. AUGUSTINE ROAD
SUITE 7
JACKSONVILLE, FL 32207 US

FEI Number: 02-0785554

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MACMANUS, THOMAS
1510 SILVER OAK LANE
JACKSONVILLE, FL 32223 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: KUCALA, MICHAL
Address: 5565 JEREMY LANE
City-St-Zip: JACKSONVILLE, FL 32257 US

Title: D () Delete
Name: MACMANUS, THOMAS
Address: 1510 SILVER OAK LANE
City-St-Zip: JACKSONVILLE, FL 32223 US

Title: P () Delete
Name: KUCALA, MICHAL
Address: 5565 JEREMY LANE
City-St-Zip: JACKSONVILLE, FL 32257 US

Title: VP () Delete
Name: MACMANUS, THOMAS
Address: 1510 SILVER OAK LANE
City-St-Zip: JACKSONVILLE, FL 32223 US

Title: S () Delete
Name: MACMANUS, THOMAS
Address: 1510 SILVER OAK LANE
City-St-Zip: JACKSONVILLE, FL 32223 US

Title: T () Delete
Name: KUCALA, MICHAL
Address: 5565 JEREMY LANE
City-St-Zip: JACKSONVILLE, FL 32257 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: THOMAS R. MACMANUS

D

04/28/2008

Electronic Signature of Signing Officer or Director

Date