

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000133304

FILED  
Feb 21, 2008  
Secretary of State

Entity Name: SPRING CLEANING COMMERCIAL LAUNDRY, CORP

## Current Principal Place of Business:

401 ENTERPRISE ST  
UNIT # 419  
OCOOE, FL 34761

## New Principal Place of Business:

419 ENTERPRISE ST  
OCOOE, FL 34761

## Current Mailing Address:

401 ENTERPRISE ST  
UNIT # 419  
OCOOE, FL 34761

## New Mailing Address:

419 ENTERPRISE ST  
OCOOE, FL 34761

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BARNEY, JOSE F  
4230 WILLOW BAY DR  
WINTER GARDEN, FL 34787 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: P ( ) Delete  
Name: BARNEY, JOSE F  
Address: 4230 WILLOW BAY DR  
City-St-Zip: WINTER GARDEN, FL 34787

Title: VP ( ) Delete  
Name: BARNEY, JUAN C  
Address: 2728 DORADO CT  
City-St-Zip: APOKA, FL 32703

Title: S ( ) Delete  
Name: VARGAS, JAIME F  
Address: 229 SE 34 PLACE  
City-St-Zip: OCALA, FL 34471

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change ( ) Addition  
Name: BARNEY, JUAN C  
Address: 614 SETTING SUN DR.  
City-St-Zip: WINTER GARDEN, FL 34787

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: FELIPE BARNEY

FB

02/21/2008

Electronic Signature of Signing Officer or Director

Date