

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED
Apr 19, 2007
Secretary of State**

DOCUMENT# P06000144687

Entity Name: SPLISH SPLASH PRESSURE WASHING INC.

Current Principal Place of Business:

91 S PIEDMONT AVE
PORT ORANGE, FL 32129

New Principal Place of Business:

Current Mailing Address:

91 S PIEDMONT AVE
PORT ORANGE, FL 32129

New Mailing Address:

FEI Number: 22-3947187 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

RICHARD K. CHURCHMAN, PA
1255 MASON AVE
DAYTONA BEACH, FL 32117 US

Name and Address of New Registered Agent:

BONNIE'S ACCOUNTING SERVICE
909 BIG TREE RD.
SOUTH DAYTONA, FL 32119 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: BONNIE BARNARD 04/19/2007
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: NICHOLS, PEGGY A
Address: 91 S PIEDMONT AVE
City-St-Zip: PORT ORANGE, FL 32129

Title: VSD () Delete
Name: NICHOLS, BRUCE E
Address: 91 S PIEDMONT AVE
City-St-Zip: PORT ORANGE, FL 32129

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: SEC () Change (X) Addition
Name: ROTELLA, JOSEPH
Address: 1222 TRACY DR
City-St-Zip: PORT ORANGE, FL 32129

Title: TRE () Change (X) Addition
Name: LINDSTROM, JOSEPH
Address: 1323 ASPEN ST
City-St-Zip: BUNNELL, FL 32110

I hereby certify that the information supplied with this filing does not qualify for the 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: PEGGY A. NICHOLS PTD 04/19/2007
Electronic Signature of Signing Officer or Director Date