2007 FOR PROFIT CORPORATION ANNUAL REPORT

changed, or on an attachment with an address

SIGNATURE:

May 29, 2007 8:00 am Secretary of State DOCUMENT # P93000044523 05-29-2007 90043 032 ***150.00 1. Entity Name WHITE DOVE CLEANING, CORP. 40110119 Principal Place of Business Mailing Address 7353 COPPERFIELD CIR. 7353 COPPERFIELD CIR. LAKE WORTH, FL 33467 LAKE WORTH, FL 33467 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 05212007 Chg-P CR2E034 (12/06) City & State City & State 4. FEI Number Applied For 65-0427445 Not Applicable Zio Country Country Żip \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name GERMANO, JOSEPH J Street Address (P.O. Box Number is Not Acceptable) 7353 COPPERFIELD CIR. LAKE WORTH, FL 33467 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Due by September 14, 2007 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete TITLE ☐ Change ■ Addition GERMANO, JOSEPH J NAME NAME STREET ADDRESS 7353 COPPERFIELD CIR. STREET ADDRESS CITY - ST - ZIP LAKE WORTH, FL 33467 CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition GERMANO, DENISE L NAME 7353 COPPERFIELD CIR. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP LAKE WORTH, FL 33467 CITY-ST-ZIP TITLE ☐ Delete --- Change --- --- Addition GERMANO, STEPHEN NAME NAME 7353 COPPERFIELD CIR. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP LAKE WORTH, FL 33467 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP TITLE Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST-ZIP CITY-ST-ZIP 12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if

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