

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000081898

Entity Name: CLEANER CLOTHES CORP.

FILED
Mar 24, 2009
Secretary of State

Current Principal Place of Business:

4723 DEL PRADO BLVD. SOUTH
CAPE CORAL, FL 33904

New Principal Place of Business:

Current Mailing Address:

4723 DEL PRADO BLVD. SOUTH
CAPE CORAL, FL 33904

New Mailing Address:

4723 DEL PRADO BLVD. SOUTH
CAPE CORAL, FL 33904 US

FEI Number: 65-0453100

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AGRANOVE, PAULA
4723 DEL PRADO BLVD. S
CAPE CORAL, FL 33904 US

Name and Address of New Registered Agent:

AGRANOVE, PAULA MRS
4723 DEL PRADO BLVD. S
CAPE CORAL, FL 33904 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: PAULA AGRANOVE

03/24/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: AGRANOVE, PAULA
Address: 4723 DEL PRADO BLVD. SO
City-St-Zip: CAPE CORAL, FL

Title: VSTD () Delete
Name: AGRANOVE, BENNETT
Address: 4723 DEL PRADO BLVD. SO
City-St-Zip: CAPE CORAL, FL 33904

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: AGRANOVE, PAULA MRS
Address: 4723 DEL PRADO BLVD. SO
City-St-Zip: CAPE CORAL, FL 33904 US

Title: VSTD (X) Change () Addition
Name: AGRANOVE, BENNETT P MR
Address: 4723 DEL PRADO BLVD. SO
City-St-Zip: CAPE CORAL, FL 33904

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: PAULA AGRANOVE

PRES

03/24/2009

Electronic Signature of Signing Officer or Director

Date