## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # P97000092760

1. Entity Name

SUN RAY'S CARPET & UPHOLSTERY CLEANING OF WEST PALM BEACH, INC.



Mailing Address

414 WESTWOOD CIRCLE WEST W. PALM BEACH, FL 33411 US

Principal Place of Business

414 WESTWOOD CIRCLE WEST W. PALM BEACH, FL 33411 US

## FILED Mar 03, 2006 08:00 AM Secretary of State



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02062006 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0793147 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ALDEN, JAMES R 414 WESTWOOD CIR W WEST PALM BEACH, FL 33411

SIGNATURE

## DO NOT WRITE IN THIS SPACE

8.	The above named entity submits this statement for the purpose of changing its registered office or registered agent, o	or both, in the State of Florida.	I am lamiliar with, and accept
	the obligations of registered agent.		

(NOTE: Registered Agent signature required when reinstalling)

DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00  Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees UNOUUN455483 03/15/08-80058-018-150.00

OFFICERS AND DIRECTORS 10 TITLE ALDEN, JAMES R STREET ADDRESS 414 WESTWOOD CIR. WEST C/TY-ST-ZM WEST PALM BCH, FL 33411 ALDEN, CARRLYN NAME STREET ADDRESS 414 WESTWOOD CIR, WEST CITY-ST-ZIP WEST PALM BCH, FL 33411 TITLE NAME STREET ADDRESS CITY-ST-ZIP SILE NAME STREET ADDRESS City-St-782 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

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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 changed, or on an attachment with an address, with all other like ergpowered.

SIGNATURE: X

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/8/06

Daytims Fhone #