

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000090815

Entity Name: AUTO CLEAN PLUS, INC.

FILED  
Apr 24, 2009  
Secretary of State

## Current Principal Place of Business:

533 ORTON AVE.  
#112  
FT. LAUDERDALE, FL 33304

## Current Mailing Address:

533 ORTON AVE.  
#112  
FT. LAUDERDALE, FL 33304

## New Principal Place of Business:

2909 VISTAMAR ST.  
#127  
FT. LAUDERDALE, FL 33304

## New Mailing Address:

2909 VISTAMAR ST.  
#127  
FT. LAUDERDALE, FL 33304

FEI Number: 65-0955595

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SEVERIN, KEVIN  
533 ORTON AVE.  
#112  
FT. LAUDERDALE, FL 33304 US

## Name and Address of New Registered Agent:

SEVERIN, KEVIN  
2909 VISTAMAR ST.  
#127  
FT. LAUDERDALE, FL 33304 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: KEVIN SEVERIN

04/24/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DPS ( ) Delete  
Name: SEVERIN, KEVIN  
Address: 533 ORTON AVE. #112  
City-St-Zip: FT. LAUDERDALE, FL 33304

Title: VP ( ) Delete  
Name: BLOCK, MICHAEL  
Address: 14 E OAKLAND PK. BLVD.  
City-St-Zip: FORT LAUDERDALE, FL 33334

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change ( ) Addition  
Name: SEVERIN, KEVIN  
Address: 2909 VISTAMAR ST. #127  
City-St-Zip: FT. LAUDERDALE, FL 33304

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: KEVIN SEVERIN

DPS

04/24/2009

Electronic Signature of Signing Officer or Director

Date