## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S89679

City-St-Zip:

Entity Name: CLEMDOR ENTERPRISES, INC.

FILED Jan 07, 2006 Secretary of State

Current P	rincipal Place	of Business:	New Principal Place of Business:			
C/O CLEMENTINE VROCHIDES 2751 SOUTH OCEAN DR., APT #1804 HOLLYWOOD, FL 33019			C/O CLEMENTINE VROCHIDIS 2751 SOUTH OCEAN DR., APT #1804 HOLLYWOOD, FL 33019			
Current N	lailing Addres	s:	New Mailing Address:			
C/O G. VROCHIDES 2751 SOUTH OCEAN DR., APT #1804 HOLLYWOOD, FL 33019			C/O G. VROCHIDIS 2751 SOUTH OCEAN DR., APT #1804 HOLLYWOOD, FL 33019			
FEI Number	: 65-0296661	FEI Number Applied For ( )	FEI Number Not Appl	icable ( )	Certificate of Status Desired (X)	
Name and	l Address of C	urrent Registered Agent:	Name and	Address o	f New Registered Agent:	
2751 SOU #1804S HOLLYWO	IS, CLEMENTINTH OCEAN DR DOD, FL 33019 named entity selections	NVE US	ourpose of changing i	ts registered	d office or registered agent, or both,	
SIGNATUI	RE:					
	Electroni	c Signature of Registered Age	ent		Date	
Election Car	mpaign Financing	Trust Fund Contribution ( ).				
OFFICER	S AND DIRECT	ORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR		
Title: Name: Address: City-St-Zip:	P () VROCHIDIS, CL 2751 S. OCEAN HOLLYWOOD, I	DR #1804	Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VP () VROCHIDIS, GE 2751 S. OCEAN HOLLYWOOD, I	DR #1804	Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () VROCHIDIS, CL 2751 S. OCEAN HOLLYWOOD, I	DR #1804	Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	( )	Delete	Title: Name: Address: City-St-Zip:	WAGNER, IF	EAN DR. #1804 S	
Title: Name: Address:	( )	Delete	Title: Name: Address:	STRINGER \	( ) Change (X) Addition /ROCHIDIS,, ANTOINETTE EAN DR #1804 S	

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.

City-St-Zip: HOLLYWOOD, FL

SIGNATURE: GEORGE VROCHIDIS VP 01/07/2006