## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S89679

FILED Jan 09, 2008 Secretary of State

Entity Name: CLEMDOR ENTERPRISES, INC.

| Current Principal Place of Business:   |   |                                 | New Principal Plac                          | New Principal Place of Business:             |  |
|--|---|---------------------------------|---|--|--|
| C/O CLEM<br>2751 SOU   | ENTINE VROC<br>TH OCEAN DR<br>OOD, FL 33019           | CHIDIS<br>2., APT #1804         | •   |  |  |
| Current Mailing Address:   |   |                                 | New Mailing Addre                           | New Mailing Address:                         |  |
| C/O CLEMENTINE VROCHIDIS<br>2751 SOUTH OCEAN DR., APT #1804<br>HOLLYWOOD, FL 33019   |   |                                 |   |  |  |
| FEI Number:  | 65-0296661  | FEI Number Applied For ( )      | FEI Number Not Applicable ( )               | Certificate of Status Desired (X)            |  |
| Name and Address of Current Registered Agent: Name and Address of New Registered Agent:  |   |                                 |   |  |  |
| VROCHIDIS, CLEMENTINE<br>2751 SOUTH OCEAN DRIVE<br>#1804S<br>HOLLYWOOD, FL 33019 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:   |   |                                 |   |  |  |
|  | Electron  | ic Signature of Registered Agen | t   | Date   |  |
| Election Can   | npaign Financing                                      | Trust Fund Contribution ( ).    |   |  |  |
| OFFICERS AND DIRECTORS:  |   |                                 | ADDITIONS/CHANG                             | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:  | P ()<br>VROCHIDIS, CL<br>2751 S. OCEAN<br>HOLLYWOOD,  | DR #1804                        | Title:<br>Name:<br>Address:<br>City-St-Zip: | () Change () Addition                        |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:  | VP ()<br>VROCHIDIS, GE<br>2751 S. OCEAN<br>HOLLYWOOD, | DR #1804                        | Title:<br>Name:<br>Address:<br>City-St-Zip: | () Change () Addition                        |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:  | D ()<br>VROCHIDIS, CL<br>2751 S. OCEAN<br>HOLLYWOOD,  | DR #1804                        | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition                      |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:  | D ()<br>WAGNER, IREN<br>2751 S. OCEAN<br>HOLLYWOOD,   | DR. #1804 S                     | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition                      |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:  |   |                                 | Title:<br>Name:<br>Address:<br>City-St-Zip: | () Change () Addition                        |  |
|  |   |                                 |   |  |  |

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: GEORGE VROCHIDIS VP 01/09/2008