

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S89679

FILED
Jan 22, 2009
Secretary of State

Entity Name: CLEMDOR ENTERPRISES, INC.

Current Principal Place of Business:

C/O CLEMENTINE VROCHIDIS
2751 SOUTH OCEAN DR., APT #1804
HOLLYWOOD, FL 33019

New Principal Place of Business:

Current Mailing Address:

C/O CLEMENTINE VROCHIDIS
2751 SOUTH OCEAN DR., APT #1804
HOLLYWOOD, FL 33019

New Mailing Address:

FEI Number: 65-0296661

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VROCHIDIS, CLEMENTINE
2751 SOUTH OCEAN DRIVE
#1804S
HOLLYWOOD, FL 33019 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: VROCHIDIS, CLEMENTIN, E
Address: 2751 S. OCEAN DR #1804
City-St-Zip: HOLLYWOOD, FL

Title: VP () Delete
Name: VROCHIDIS, GEORGE,
Address: 2751 S. OCEAN DR #1804
City-St-Zip: HOLLYWOOD, FL

Title: D () Delete
Name: VROCHIDIS, CLEMENTIN, E
Address: 2751 S. OCEAN DR #1804
City-St-Zip: HOLLYWOOD, FL

Title: D () Delete
Name: WAGNER, IRENE,
Address: 2751 S. OCEAN DR. #1804 S
City-St-Zip: HOLLYWOOD, FL

Title: D () Delete
Name: STRINGER VROCHIDIS,, ANTOINETTE
Address: 2751 S. OCEAN DR #1804 S
City-St-Zip: HOLLYWOOD, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: GEORGE VROCHIDIS

VP

01/22/2009

Electronic Signature of Signing Officer or Director

_____ Date