

2025 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F21000001455

Entity Name: CLEANAIRE FL, INC.

Current Principal Place of Business:

112 S. REPRESS ST.
WASHINGTON, NC 27889

Current Mailing Address:

112 S. REPRESS ST.
WASHINGTON, NC 27889 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: _____

Electronic Signature of Registered Agent

_____ Date

Officer/Director Detail :

Title DIRECTOR
Name MUESER, MARK
Address 112 S. REPRESS ST.
City-State-Zip: WASHINGTON NC 27889

Title DIRECTOR
Name MJARTAN, IVAN
Address 112 S. REPRESS ST.
City-State-Zip: WASHINGTON NC 27889

Title TREASURER
Name ABBURU, KISHORE
Address 112 S. REPRESS ST.
City-State-Zip: WASHINGTON NC 27889

Title SECRETARY
Name ROWE, R. LEONARD JR.
Address 112 S. REPRESS ST.
City-State-Zip: WASHINGTON NC 27889

Title ASSISTANT SECRETARY
Name CLONINGER, MATTHEW J.
Address 112 S. REPRESS ST.
City-State-Zip: WASHINGTON NC 27889

Title PRESIDENT
Name MUESER, MARK
Address 112 S. REPRESS ST.
City-State-Zip: WASHINGTON NC 27889

Title VP
Name WINDLEY, SHAWN
Address 112 S. REPRESS ST.
City-State-Zip: WASHINGTON NC 27889

Title ASSISTANT SECRETARY
Name IHRIG, JOEL
Address 112 S. REPRESS ST.
City-State-Zip: WASHINGTON NC 27889

Continues on page 2

I hereby 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 all other like empowered.

SIGNATURE: KISHORE ABBURU

TREASURER

03/25/2025

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name ABBURU, KISHORE
Address 112 S. REPRESS ST.
City-State-Zip: WASHINGTON NC 27889