

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000139302

Entity Name: AUTOMATI - CLEAN, INC.

FILED
Apr 29, 2008
Secretary of State

Current Principal Place of Business:

POST OFFICE BOX 130403
TAMPA, FL 33681

New Principal Place of Business:

3915 DUKE FIRTH STREET
LAND O LAKES, FL 34638 US

Current Mailing Address:

POST OFFICE BOX 130403
TAMPA, FL 33681

New Mailing Address:

POST OFFICE BOX 2566
LAND O LAKES, FL 34639 US

FEI Number: 05-0628597

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AMELIA, FLOYD M PRES
4805 BAYHERON PLACE
#717
TAMPA, FL 33616 US

Name and Address of New Registered Agent:

AMELIA, FLOYD M PRES
3915 DUKE FIRTH STREET
LAND O LAKES, FL 34638 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: AMELIA M FLOYD

04/29/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FLOYD, AMELIA M
Address: POST OFFICE BOX 130403
City-St-Zip: TAMPA, FL 33681

Title: VST () Delete
Name: FLOYD, AARON C
Address: POST OFFICE BOX 130403
City-St-Zip: TAMPA, FL 33681

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FLOYD, AMELIA M
Address: POST OFFICE BOX 2566
City-St-Zip: LAND O LAKES, FL 34639 US

Title: VST (X) Change () Addition
Name: FLOYD, AARON C
Address: POST OFFICE BOX 2566
City-St-Zip: LAND O LAKES, FL 34639 US

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: AMELIA M FLOYD

PRES

04/29/2008

Electronic Signature of Signing Officer or Director

Date