## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**  Jul 07, 1999 8:00 am Secretary of State 07-07-1999 90001 023 \*\*\*550.00

**FILED** 

## 1999 DOCUMENT #

STEAM BRITE, INC.

|   |   |  |  |   |                                      |  |  |   | ) BIB) BIBN BIBN 1881               |  |
|---|---|--|--|---|--------------------------------------|--|--|---|-------------------------------------|--|
| Principal Place of Business Mailing Address     |   |  |  |   |                                      |  |  | ) 1991111 9239 Hely 10070 01707 (1007 1781 07811 07811  |                                     |  |
| 3851 ORANGE LAKE DR<br>ORLANDO FL 32817         |   |  |  | 3851 ORANGE LAKE DR<br>ORLANDO FL 32817                             |                                      |  |  |   |                                     |  |
| US  |   |  |  | US-   |                                      |  |  | DO NOT WRITE IN THIS SPACE  |                                     |  |
|   |   |  |  |   |                                      |  |  | <ol> <li>Date Incorporated or Qualified</li> <li>03/14/1983</li> </ol>  |                                     |  |
| 2. Principal Place of Business                  |   |  |  | 2a. Mailing Address   |                                      |  |  | 4. FEI Number   | Applied For                         |  |
| 21  |   |  |  | 26  |                                      |  |  | 59-2284483  | Not Applicable                      |  |
| Suite, Apt. #, etc.                             |   |  |  | Suite, Apt. #, etc.   |                                      |  |  | E Contificate of Statue Decired   | 3.75 Additional<br>Fee Required     |  |
| City & State                                    |   |  |  | City & State  |                                      |  |  | 6. Election Campaign Financing \$   | 5.00 May Be                         |  |
| 23  |   |  |  | 28  |                                      |  |  |   | Added to Fees                       |  |
| Zip Country                                     |   |  |  | Zip Country   |                                      |  |  | 8. This corporation owes the current year   |                                     |  |
| 24  | • —   |  | 29   | 9 30  |                                      |  | Intangible Personal Property.    Yes No            |   |                                     |  |
| 9. Name and Address of Current Registered Agent |   |  |  |   |                                      | 10. Name and Address of New Registered Agent |  |   | t                                   |  |
|   |   |  | _  | <u> </u>  |                                      | 81   | Name   |   |                                     |  |
| DUBA, MICHAEL A.                                |   |  |  |   |                                      |  | Street Address (P.O. Box Number is Not Acceptable) |   |                                     |  |
| 1902 N LAKEMONT DR.                             |   |  |  |   |                                      |  | Street A   | address (P.O. Box Number is Not Acceptable)   |                                     |  |
| WINTER PARK FL 32792                            |   |  |  |   |                                      | 83   |  |   |                                     |  |
|   |   |  |  |   |                                      |  |  |   | <del></del>                         |  |
|   |   |  |  |   |                                      | 84   | City   | FL  85  |                                     |  |
| 11. Pursuant office or agent. I                 | t to the provis<br>registered ag<br>am familiar v | sions of sections 607.05<br>gent, or both, in the Sta<br>rith, and accept the obli | 02 and 607<br>te of Florida<br>gations of, | .1508, Florida Statut<br>a. Such change was<br>section 607.0505, Fl | es, the ab<br>authorize<br>orida Sta | ove-<br>d by<br>tutes                        | named cor<br>the corpor                            | poration submits this statement for the purpose of changing ation's board of directors. I hereby accept the appointment | g its registered<br>t as registered |  |
| SIGNATURE                                       | -   |  |  |   |                                      |  |  |   |                                     |  |
|   | Signature, typed                                  | or printed name of registered ag   |  |   |                                      | ered A                                       | gent signature                                     | required when reinstating) DATE   | DECTORC IN 42                       |  |
| 12.   | : DD  | OFFICERS A   | ND DIREC                                   |   | 13.                                  |  |  | ADDITIONS/CHANGES TO OFFICERS AND DIF   |                                     |  |
| TITLE   | PD  | OLIATI A   |  | L_] DELETE  | 1.1 Ti                               |  |  | لــا ت  | hange Addition                      |  |
| NAME DUBA, MICHAEL A.                           |   |  |  | 1.2 NAME  |                                      |  |  |   |                                     |  |
| STREET ADDRESS 3851 ORANGE LAKE DR              |   |  |  | 1.3 STREET ADDRESS  |                                      |  |  |   |                                     |  |
| CITY-ST-ZIP                                     |   | ) FL 32817   |  | -   | _                                    | ITY-ST                                       |  |   |                                     |  |
| TITLE   | VST   |  | -  | DELETE  | 1                                    | TLE "  | ^  |   | hange Addition                      |  |
| NAME  | = = = : • • • • • • • • •                         |  |  | 2.2 NAI   |                                      |  |  |   | ľ                                   |  |
| STREET ADDRESS 3851 ORANGE LAKE DR              |   |  |  | 2.3 STR   |                                      |  | ADDRESS  |   |                                     |  |
| CITY-ST-ZIP                                     | <del>+</del>                                      | ) FL 32817   |  |   | _                                    | ITY-ST                                       | -ZIP   |   |                                     |  |
| THLE  | D   |  |  | DELETE  | 3.1 Ti                               | TLE  |  | [_] ci  | hange L Addition                    |  |
| NAME  | Duba, M/  |  |  |   | 3.2 N                                | AME  |  |   |                                     |  |
| STREET ADDRESS 3851 ORANGE LAKE DR              |   |  |  | 3.3 STREET.   |                                      |  | ADDRESS  |   |                                     |  |
| CITY-ST-ZIP                                     | ORLANDO   | ) FL 32817   |  |   | 3.4 C                                | ITY-ST                                       | -ZIP   |   |                                     |  |
| TITLE   |   |  |  | DELETE  | 4.1 TI                               | TLE  |  | c   | hange Addition                      |  |
| NAME  | ļ   |  |  |   | 4.2 N                                | AME  |  |   | 1                                   |  |
| STREET ADDRESS                                  | }   |  |  |   | 4.3 S                                | TREET  | ADDRESS  |   | ľ                                   |  |
| CITY-ST-ZIP                                     |   |  |  |   | 4.4 C                                | ITY-SI                                       | r-ZIP  |   |                                     |  |
| TITLE   |   |  |  | DELETE  | 5.1 T                                | TLE  |  | c   | hange Addition                      |  |
| NAME 4  |   | · · · · · · · · · · · · · · · · · · ·  |  |   | 5.2 N                                | AME  |  |   | İ                                   |  |
| STREET ADDRESS                                  | 1   | 7  |  |   | 5.3 S                                | TREET  | ADDRESS  |   |                                     |  |
| CITY-ST-ZIP                                     |   |  |  |   |                                      | ITY-S1                                       | ì  |   |                                     |  |
| TITLE   |   |  |  | DELETE  | 6.1 T                                |  |  | Пс  | hange Addition                      |  |
| NAME  | 1   |  |  |   | 6.2 N                                |  |  |   |                                     |  |
| STREET ADDRESS                                  |   |  |  |   |                                      |  | ADDRESS  |   |                                     |  |

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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

6.4 CITY-ST-ZIP

in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: