

**2002 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Sep 16, 2002 8:00 am**  
**Secretary of State**

09-16-2002 90159 023 \*\*\*150.00

**DOCUMENT # P01000084612**  
 1. Entity Name  
**SIMPLY CLEAN, INC.**

Principal Place of Business Mailing Address  
 11184 W. SAMPLE RD. 11184 W. SAMPLE RD.  
 CORAL SPRINGS FL 33065 CORAL SPRINGS FL 33065



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address  
**11164 W. SAMPLE RD 11164 W. SAMPLE RD**  
 Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State  
**CORAL SPRINGS FL CORAL SPRINGS FL**

4. FEI Number Applied For  
**260-0007901** Not Applicable

Zip Country Zip Country  
**33065-2623 BROWARD 33065-2623 BROWARD**

5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
**SISSON, LARRY**  
**218 SOUTHERN COUNTRY LN.**  
**QUINCY FL 32351**

7. Name and Address of New Registered Agent  
 Name **SAMANTHA F. STEIN**  
 Street Address (P.O. Box Number is Not Acceptable)  
**11164 W. SAMPLE RD**  
 City **CORAL SPRINGS FL** Zip Code **33065-2623**

8. 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. I am familiar with, and accept the obligations of registered agent.  
 SIGNATURE *[Signature]* DATE **9/12/02**  
(NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.  (See criteria on back)

**FILE NOW!!! FEE IS \$550.00**  
**After September 13, 2002 Fee will be \$750.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP STEIN, CHRISTOPHER R 11184 W. SAMPLE RD. CORAL SPRINGS FL 33065 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST STEIN, DAVID WILLIAM 11184 W. SAMPLE RD. CORAL SPRINGS FL 33065 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP STEIN, CHRISTOPHER R. 11164 W. SAMPLE RD. CORAL SPRINGS, FL 33065-2623 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST SAMANTHA F. STEIN 11164 W. SAMPLE RD. CORAL SPRINGS, FL 33065-2623 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 report or supplemental 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* DATE **9/11/02** DAYTIME PHONE # **954-796-9633**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (4/02)

Attachment

678078

# P01000084612

TO WHOM IT MAY CONCERN:

I, CHRISTOPHER R. STEIN, OWNER OF  
SIMPLY CLEAN, INC. DID NOT RECEIVE ANY PRIOR  
NOTICE OF FILING THIS UNIFORM BUSINESS REPORT.

I RECEIVED 1<sup>ST</sup> NOTICE TODAY 9/11/02 AFTER I RETURNED  
FROM LUNCH.

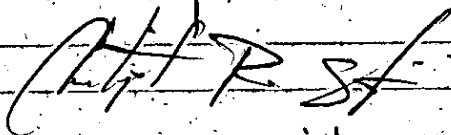
I NOTIFIED A REPRESENTATIVE AT THE DIVISION OF CORPORATIONS  
AND ALSO MADE THE CORRECTIONS TO THE MAILING ADDRESS.

THE CORRECT ADDRESS IS:

SIMPLY CLEAN, INC.  
11164 W. SAMPLE ROAD  
CORAL SPRINGS, FL 33065-2623

I HAVE REQUESTED THIS ADDRESS CHANGE 3 TIMES IN THE  
PAST YEAR.

RESPECTFULLY,



CHRISTOPHER R. STEIN, OWNER