

**FOR PROFIT CORPORATION
 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # **P01000084892**
 1. Entity Name
NET CLEANING, INC

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
100 LINCOLN RD
 Suite, Apt. #, etc. **1401**

3. Mailing Address
 Suite, Apt. #, etc.

City & State
MIAMI BEACH, FL

Zip **33139** Country **USA**

DO NOT WRITE IN THIS SPACE

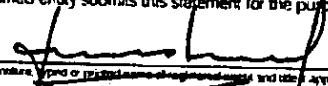
4. FEI Number **65-1133822** Applied For Not Applicable

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

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent
 Name **TERESA Z. LOPEZ**
 Street Address (P.O. Box Number is Not Acceptable)
100 LINCOLN RD # 1401
 City **MIAMI BEACH** FL Zip Code **33139**

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.

SIGNATURE  DATE **6-18-02**

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.

January 1 - May 1 Fee is \$150.00
 After May 1 Fee is \$250.00
 Amended UBR is \$61.25
 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	TITLE NAME STREET ADDRESS CITY-ST-ZIP
D/P TERESA Z. LOPEZ 100 LINCOLN RD # 1401 MIAMI BEACH, FL 33139	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP
D/VICE - PRESIDENT MARIANO A. RETAMAL 100 LINCOLN RD # 1401 MIAMI BEACH, FL 33139	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP
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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplementary 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 on an attachment with an address, with all other like empoweread.

SIGNATURE:  DATE **6-18-02** (305) 321-5912

CR2E0346 (12/01)