

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 344129

(2)

1. Corporation Name

CLEMENTE WIPING CLOTH CORP.

Principal Place of Business

7410 NE 3RD CT.
MIAMI FL 33138

Mailing Address

7410 NE 3RD CT.
MIAMI FL 33138

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

3. Date Incorporated or Qualified
04/07/1969

3a. Date of Last Report

02/24/1994 1995

4. FET Number
59-1237896

Applied For
Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

NEILL, J JAMES
7410 NE 3RD CT
MIAMI FL 33138

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1503, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of Registered Agent or Registered Agent

Signature of Registered Agent or Registered Agent

DATE

OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY, ST, ZIP
PD	NEILL, J JAMES	2465 BIMINI LANE	FT LAUDERDALE FL
ST	NEILL, JOY	2465 BIMINI LANE	FT LAUDERDALE FL
TITLE	NAME	STREET ADDRESS	CITY, ST, ZIP
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28 TITLE	28 NAME	28 STREET ADDRESS	28 CITY, ST, ZIP
29 TITLE	29 NAME	29 STREET ADDRESS	29 CITY, ST, ZIP
30 TITLE	30 NAME	30 STREET ADDRESS	30 CITY, ST, ZIP

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: X. J. Neill (JOY NEILL)
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/7/96 (954) 561-4034