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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

TIONS	SION OF CORPORATIONS	DIVISION OF	Cooks se	1996
	(8)	(8)		CUMENT #
I HABIH BIRK ALUK ALUK ALUKA HABI MBAK BIR ALUK ALUK			ORPORATION	POLY-CLEAN COR
	S	eiling Address		al Place of Business
		301 PETTY DRIVE CANTONMENT FL 325		PETTY DR TONMENT FL 32533
3. Date Incorporated or Qualified 3a. Date of 01/16/1974 01/		US 		·
4. FEI Number 59-1509249	lress	Mailing Address	ss 2a .	icipal Place of Business
5. Certificate of Status Desired	⊭, etc.	Suite, Apt. #, etc.		te, Apt. #, etc.
6. Election Campaign Financing		City & State	27	/ & State
try 8. This corporation has liability for intangible tax u	Country	Zφ	Country	
Florida Statutes Yes No 10. Name and Address of New Registered Ag	30	lered Agent	25 29 and Address of Current Registe	25 9 Name and
	·····			<u></u>
Street Address (P.O. Box Number is Not Acceptable)	82 Street Addr		ł	IOLTON, JAMES R 101 PETTY DR
	83		32533	CANTONMENT FL 325
33				
	da Statutes, the above-named coroor	7.1508, Florida Statute change was authorize 0505, Florida Statutes	ns of Sections 607,0502 and 607, both, in the State of Florida. Such i I the obligations of, Section 607.0	rsuant to the provisions o registered agent, or both, niliar with, and accept the
e-named corporation submits this statement for the purpose of changerporation's board of directors. I hereby accept the appointment as request sgrature required when reinstating: DATE	la Statutes, the above-named corpor	change was authorize 0505, Florida Statutes	ns of Sections 607,0502 and 607, 00th, in the State of Florida. Such it the obligations of, Section 607.00 peritod nations of repulsived agent and the if and OFFICERS AND DIRECT	registered agent, or both, niliar with, and accept the
e-named corporation submits this statement for the purpose of changerporation's board of directors. I hereby accept the appointment as requestive required when reinstating: ADDITIONS/CHANGES TO OFFICERS AND DI	da Statutes, the above-named corpor authorized by the corporation's boar Statutes (NOTE Registered Agent signature requires	change was authorize 0505, Florida Statutes	OFFICERS AND DIRECT	TURE Signal are typed or pents
e-named corporation submits this statement for the purpose of change procedure's board of directors. I hereby accept the appointment as request sgnature required when reinstating? ADDITIONS/CHANGES TO OFFICERS AND DI	da Statutes, the above named corpor authorized by the corporation's boar Statutes. (NOTE Flogstered Agent signature required	change was aumorize 0505, Florida Statutes raikabe (K0 10RS	The obligations of Section 607.0: protect rains of equilibria agent and this if an OFFICERS AND DIRECT	TURE Signal in typed or profit
e-named corporation submits this statement for the purpose of change provided in the purpose of change provided in the submits this statement for the purpose of change provided in the purpose of change provided	da Statutes, the above-named corpor authorized by the corporation's boar Statutes. (NOTE Registered Agent sgnature required 13. ETE 1.1 TITLE 1.2 NAME	change was aumorize 0505, Florida Statutes raikabe (K0 10RS	Officers AND DIRECT J. JAMES R. TY DR.	TURE Signal in specific pents PD HOLTON, Ja
e-named corporation submits this statement for the purpose of change provided in submits this statement for the purpose of change provided in sphalting to the appointment as required sphalting to the appointment as required when reinstating to the appointment as required when reinstating to the appointment as required when reinstating to the appointment as required appointment as require	da Statutes, the above-named corpor authorized by the corporation's boar Statutes. (NOTE Flogistered Agent sgnature required 13. ETE 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP ETE 2.1 TITLE	change was aumorize 0505, Florida Statutes raikabe (K0 10RS	If the obligations of, Section 607.0: rented name of equilibrid agent and this if an OFFICERS AND DIRECT J. JAMES R. TY DR. JMENT FL	TURE: Signature typed or pents PD HOLTON, J. BORESS 301 PETTY ZIP CANTONME STD
EFIT ADDRESS - ST-ZIP E named corporation submits this statement for the purpose of change provided when reinstating it is a positive required when reinstating required when rei	da Statutes, the above-named corpor authorized by the corporation's boar Statutes. (NOTE Flogistered Agent sgnature required 13. ETE 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	Change was authorized to the provided Statutes (NO TORS DELETE	If the obligations of, Section 607.0: OFFICERS AND DIRECT JAMES R. TY DR. JMENT FL JAURA N. TY DRIVE	PD HOLTON, J. STD HOLTON, L. STD HOL
EFIT ADDRESS -ST-ZIP -E-named corporation submits this statement for the purpose of change provided in the statement of the purpose of change provided in the statement of the purpose of change provided in the statement of the purpose of change provided in the statement of the purpose of change provided in the p	da Statutes, the above-named corpor authorized by the corporation's boar Statutes. (NOTE Flogistered Agent signature required 13. LETE 1.1 TILLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CHY-SI-ZIP LETE 2.1 TILLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CHY-SI-ZIP	Change was authorized 2505, Florida Statutes (KO) TORS DELETE	If the obligations of, Section 607.0: OFFICERS AND DIRECT JAMES R. TY DR. JMENT FL JAURA N. TY DRIVE	TURE: Signal are typed or pent PD HOLTON, JA 301 PETTY CANTONME STD HOLTON, L
EFI ADDRESS -ST-ZIP -S	da Statutes, the above-named corpor authorized by the corporation's boar Statutes. (NOTE Flogistered Agent signature required 13. ETE 1.1 TILLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CHY-SI-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CHY-SI-ZIP 3.5 TREET ADDRESS 3.5	Change was authorized to the provided Statutes (NO TORS DELETE	If the obligations of, Section 607.0: OFFICERS AND DIRECT JAMES R. TY DR. JMENT FL JAURA N. TY DRIVE	PD HOLTON, J. STD HOLTON, L. STD HOL
e-named corporation submits this statement for the purpose of changerporation's board of directors. I hereby accept the appointment as required when reinstating: DATE	da Statutes, the above-named corpor authorized by the corporation's boar Statutes. (NOTE Flogistered Agent signature required 13. ETE 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.2 NAME	Change was authorized 2505, Florida Statutes (KO) TORS DELETE	If the obligations of, Section 607.0: OFFICERS AND DIRECT JAMES R. TY DR. JMENT FL JAURA N. TY DRIVE	PD HOLTON, J. STD HOLTON, L. STD HOL
e-named corporation submits this statement for the purpose of changerporation's board of directors. I hereby accept the appointment as required when reinstating: DATE DATE	Ida Statutes, the above-named corpor authorized by the corporation's boar Statutes. (NOTE Flogistered Agent signature required 13. LETE 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP LETE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP LETE 3.2 NAME 3.3 STREET ADDRESS 3.3 NAME 3.3 STREET ADDRESS	Change was authorized 2505, Florida Statutes (KO) TORS DELETE	If the obligations of, Section 607.0: OFFICERS AND DIRECT JAMES R. TY DR. JMENT FL JAURA N. TY DRIVE	TURE: Seguidation typed or pending Minimar with, and accept the TURE: Seguidation typed or pending DORESS 301 PETTY CANTONME STD HOLTON, L. 301 PETTY CANTONME
e-named corporation submits this statement for the purpose of changerporation's board of directors. I hereby accept the appointment as required when reinstating: DATE DATE	da Statutes, the above-named corpor authorized by the corporation's boar Statutes. (NOTE Flogistered Agent signature required by T13. ETE 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CHY-SI-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CHY-SI-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CHY-SI-ZIP	Change was authorized 2505, Florida Statutes (KO) TORS DELETE	If the obligations of, Section 607.0: OFFICERS AND DIRECT JAMES R. TY DR. JMENT FL JAURA N. TY DRIVE	TURE: Sugnitive typed or pents PD HOLTON, JA 301 PETTY CANTONME STD HOLTON, L 301 PETTY CANTONME COMESS COMESS
e-named corporation submits this statement for the purpose of change procedure is board of directors. I hereby accept the appointment as required when reinstating: ADDITIONS/CHANGES TO OFFICERS AND DI E EET ADDRESS ST-ZIP E E E E E E E E E E E E E	Ida Statutes, the above-named corpor authorized by the corporation's boar Statutes. 13. 13. 13. 14. 17.	Change was authorize 0505, Fiorida Statutes (KO) TORS DELETE	If the obligations of, Section 607.0: OFFICERS AND DIRECT JAMES R. TY DR. JMENT FL JAURA N. TY DRIVE	TURE: Sugnitive typed or pents PD HOLTON, JA 301 PETTY CANTONME STD HOLTON, L 301 PETTY CANTONME COMESS COMESS
PL e-named corporation submits this statement for the purpose of change procedure is board of directors. I hereby accept the appointment as required when renstating: ADDITIONS/CHANGES TO OFFICERS AND DI E EET ADDRESS ST-ZIP E E EET ADDRESS ST-ZIP E E E E E E E E E E E E E	Ida Statutes, the above-named corpor authorized by the corporation's boar Statutes. (NOTE Flogistered Agent signature required 13. LETE 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP LETE 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP LETE 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP LETE 3.4 TITLE 3.5 NAME 3.5 STREET ADDRESS 3.4 CITY-ST-ZIP LETE 4.1 TITLE	Change was authorize 0505, Florida Statutes (KO) TORS DELETE	If the obligations of, Section 607.0: OFFICERS AND DIRECT JAMES R. TY DR. JMENT FL JAURA N. TY DRIVE	PD HOLTON, J. 301 PETTY CANTONME STD HOLTON, L. 301 PETTY CANTONME STD HOLTON, L. 301 PETTY CANTONME STD CANTONME CANTONME CANTONME DDRESS TOP CANTONME
e-named corporation submits this statement for the purpose of changerporation's board of directors. I hereby accept the appointment as required when renstating: DATE ADDITIONS/CHANGES TO OFFICERS AND DI OFFICERS AND D	Ida Statutes, the above-named corpor authorized by the corporation's boar Statutes (NOTE Flogistered Agent signature required 13. ETE 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP ETE 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP ETE 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP ETE 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	Change was authorized D505, Florida Statutes (KO) TORS DELETE DELETE DELETE	If the obligations of, Section 607.0: OFFICERS AND DIRECT JAMES R. TY DR. JMENT FL JAURA N. TY DRIVE	PD HOLTON, J. 301 PETTY CANTONME STD HOLTON, L. 301 PETTY CANTONME STD HOLTON, L. 301 PETTY CANTONME CANTONME CANTONME CANTONME CANTONME
e-named corporation submits this statement for the purpose of change provided in submits this statement for the purpose of change provided in submits this statement for the purpose of change provided in submits this statement for the purpose of change provided in submits this statement for the purpose of change provided in submits this statement for the purpose of change provided in submits this statement for the purpose of change provided in submits this statement for the purpose of change provided in submits this statement for the purpose of change provided in submits this statement for the purpose of change provided in submits this statement for the purpose of change provided in submits this statement for the purpose of change provided in submits this statement for the purpose of change provided in submits this statement for the purpose of change provided in submits this statement for the purpose of change provided in submits the purpose	Ida Statutes, the above-named corpor authorized by the corporation's boar Statutes. (NOTE Flogistered Agent signature requirements) 13. ETE 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP ETE 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP ETE 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP ETE 5.1 TITLE 5.5 TITLE	Change was authorize 0505, Florida Statutes (KO) TORS DELETE	If the obligations of, Section 607.0: OFFICERS AND DIRECT JAMES R. TY DR. JMENT FL JAURA N. TY DRIVE	PD HOLTON, J. 301 PETTY CANTONME STD HOLTON, L. 301 PETTY CANTONME STD HOLTON, L. 301 PETTY CANTONME STD CANTONME CANTONME CANTONME DDRESS TOP CANTONME
e-named corporation submits this statement for the purpose of change procedure's board of directors. I hereby accept the appointment as required when reinstating? ADDITIONS/CHANGES TO OFFICERS AND DI E EET ADDRESSST-ZIP E EET ADDRESSST-ZIP E EET ADDRESSST-ZIP E E EET ADDRESSST-ZIP E E E E E E E E E E E E E	da Statutes, the above-named corpor authorized by the corporation's boar Statutes. NOTE Flogistered Agent a greature required	Change was authorized D505, Florida Statutes (KO) TORS DELETE DELETE DELETE	If the obligations of, Section 607.0: OFFICERS AND DIRECT JAMES R. TY DR. JMENT FL JAURA N. TY DRIVE	PD HOLTON, JA 301 PETTY CANTONME STD HOLTON, L 301 PETTY CANTONME STD HOLTON, L 301 PETTY CANTONME STD CANTONME STD HOLTON, L 301 PETTY CANTONME DDRESS ZIP CANTONME
E-named corporation submits this statement for the purpose of change procedure's board of directors. I hereby accept the appointment as required when reinstating? ADDITIONS/CHANGES TO OFFICERS AND DI E	Ida Statutes, the above-named corpor authorized by the corporation's boar Statutes. NOTE Flogistered Agent a greature require	Change was authorized D505, Florida Statutes (KO) TORS DELETE DELETE DELETE	If the obligations of, Section 607.0: OFFICERS AND DIRECT JAMES R. TY DR. JMENT FL JAURA N. TY DRIVE	TURE Signal and accept the TURE Signal and scorpt the TURE Signal and specific pents PD HOLTON, JA 301 PETTY CANTONME STD HOLTON, LA 301 PETTY CANTONME ODRESS ODRESS TOP DORESS TOP DORESS TOP DORESS TOP DORESS
e-named corporation submits this statement for the purpose of change provided in sphalture required when reinstating? ADDITIONS/CHANGES TO OFFICERS AND DITE. ADDITIONS/CHANGES TO OFFICERS AND DITE. ELECT ADDRESSST-ZIP	Ida Statutes, the above-named corpor authorized by the corporation's boar Statutes. (NOTE Flogistered Agent signature required 13. ETE 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP ETE 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	Change was authorized D505, Florida Statutes (KO) TORS DELETE DELETE DELETE	If the obligations of, Section 607.0: OFFICERS AND DIRECT JAMES R. TY DR. JMENT FL JAURA N. TY DRIVE	PD HOLTON, JA 301 PETTY CANTONME STD HOLTON, L 301 PETTY CANTONME STD HOLTON, L 301 PETTY CANTONME STD CANTONME STD HOLTON, L 301 PETTY CANTONME DDRESS ZIP CANTONME
E-named corporation submits this statement for the purpose of change procedure's board of directors. I hereby accept the appointment as required when reinstating? ADDITIONS/CHANGES TO OFFICERS AND DI E	da Statutes, the above-named corpor authorized by the corporation's boar Statutes. NOTE Flogistered Agent a greature required	Change was authorized D505, Florida Statutes First able (6.0) TORS DELETE DELETE DELETE DELETE	If the obligations of, Section 607.0: OFFICERS AND DIRECT JAMES R. TY DR. JMENT FL JAURA N. TY DRIVE	TURE Signal and accept the TURE Signal and scorpt the TURE Signal and specific pents PD HOLTON, JA 301 PETTY CANTONME STD HOLTON, LA 301 PETTY CANTONME ODRESS ODRESS TOP DORESS TOP DORESS TOP DORESS TOP DORESS
E-named corporation submits this statement for the purpose of change provided in sphalture required when reinstating? ADDITIONS/CHANGES TO OFFICERS AND DITE. ADDITIONS/CHANGES TO OFFICERS AND DITE. E-ET ADDRESSST-ZIP E-ET ADDRESS	Ida Statutes, the above-named corpor authorized by the corporation's boar Statutes. Incore Incore	Change was authorized D505, Florida Statutes First able (6.0) TORS DELETE DELETE DELETE DELETE	If the obligations of, Section 607.0: OFFICERS AND DIRECT JAMES R. TY DR. JMENT FL JAURA N. TY DRIVE	TURE Signal and accept the TURE Signal and scorpt the TURE Signal and specific pents PD HOLTON, JA 301 PETTY CANTONME STD HOLTON, LA 301 PETTY CANTONME ODRESS ODRESS TOP DORESS TOP DORESS TOP DORESS TOP DORESS

SIGNATURE:

Daytime Phone #