2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F01000003478

Entity Name: DURACLEAN SPECIALTIST, INC.

Apr 30, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business:

P.O. BOX 935 44180 AIRPORT VIEW DR. SUITE 16

LEONARDTOWN, MD 20650 HOLLYWOOD, MD 20636

Current Mailing Address: New Mailing Address:

4300 US HIGHWAY 1 SOUTH, SUITE A P.O. BOX 560886

ROCKLEDGE, FL 32955 ROCKLEDGE, FL 32956

FEI Number: 52-1795530 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SHARROW, SHIRLEY M SHARROW, SHIRLEY M

365 GUS HIPP, SUITE B 4300 US HIGHWAY 1 SOUTH, SUITE A ROCKLEDGE, FL 32956 US ROCKLEDGE, FL 32955

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: 04/30/2002

> Electronic Signature of Registered Agent Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

SHARROW, SHIRLEY M SHARROW, SHIRLEY M Name: Name: Address:

365 GUS HIPP BLVD., SUITE B 4300 US HIGHWAY 1 SOUTH, SUITE A Address:

City-St-Zip: ROCKLEDGE, FL 32955 City-St-Zip: ROCKLEDGE, FL 32955

Title: Title: (X) Change () Addition () Delete

SHARROW, ROBERT J SHARROW, ROBERT J Name: Name:

365 GUS HIPP BLVD., SUITE B Address: 4300 US HIGHWAY 1 SOUTH, SUITE A Address:

ROCKLEDGE FL 32955 ROCKLEDGE, FL 32955 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SHIRLEY M. SHARROW **PRES** 04/30/2002