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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

H13077 **DOCUMENT #**

(3)

Corporation Name SCHEA CLEAN INC

SCUDA	CLEAN,	INC.

Principal Place of Business Mailing Address

3011 1ST AVE S ST. PETERSBURG FL 33712-1038

2. Principal Place of Business

3011 1ST AVE S ST. PETERSBURG FL 33712-1038



3a. Date of Last Report 04/17/1995

3. Date incorporated or Qualified 07/19/1984

2. Princip	Principal Place of Business Suite, Apt. #, etc.		<u></u> ⊢ -	28. Mailing Address 26			4. FEI Number	Applied For	
							59-2432018	Not Applica	ble
22			Suite, Apt. #,	, etc.			5. Certificate of Status Desired	\$8.75 Additiona	I
							5. Certificate of Status Desired	Fee Required	
23	/ & State City & State 28						6. Election Campaign Financing	\$5.00 May Be	
Zip				·····			Trust Fund Contribution Added to Fees		
24)		Country	7p		intry		8. This corporation has liability for intangible tax under s. 199.0		
24 25 29 30 9. Name and Address of Current Registered Agent				30	0		Florida Statutes Yes No		
	9, 1141110	and Address of Cu	irent negistered Agent		241		10. Name and Address of New Registered	Agent	
SEC	ORD, PHILIP J.				81	Name			
	4874 LAKE CHARLES DR. N.			82	Street Addr	reet Address (P.O. Box Number is Not Acceptable)			
KENNETH CITY FL 33709									
				83					
					84	City		1-1-	
							FI	85 Zip Code	
or rec	uant to the provisi distered agent, or	ons of Sections 607.0 both, in the State of F	502 and 607,1508, Florida	Statutes, the abo	ve na	amed corpor	ation submits this statement for the purpose of cha	nging its registered of	fice
familia	ar with, and accep	of the obligations of, S	Section 607.0505, Florida S	authorized by the c Statutes:	orpo	ration's boar	ation submits this statement for the purpose of cha rd of directors. I hereby accept the appointment as	registered agent. I am	.0.5
SIGNATU	RE								
	Signature, typed:	or printed habits of registered a		(NOTE By Joseph	Agree	Signature require	Twher resisting DATE		
12. TITLE		OFFICERS	AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12	
	SECORE	PHILIP J	☐ DELE	ΙΕ 1 1111	"LF			Change Addition	i l
NAME	4074 1 4	KE CHARLES DR.	A.	1 2 NA	ME				
STREET ADDR	MENINET	H CITY FL	N.	1.3 ST	REET A	ADDRESS			ļ
CITY - ST - ZIP	VP	n Gill FL		1.4 CIT	TY - ST	- ZIP			
TITLE	,	MADICA	DELE	TE 2 1 TI	ILE	-		Change	1
NAME		I, MARISA C.	A 1	2 2 NA	ME		_		
STREET ADDRE		KE CHARLES DR.	N	2356	REET A	DDRESS.			
City-St-ZIP	VENNET	H CITY FL		2 4 01	Y-ST-	- ZIP			
TITLE			DELET	JE 3 1 111	r.E			Change Addition	ᅱ
NAME				3.2 NAI	ME		<u>-</u>	, , <u>,</u>	
STREET ADDRE	ESS			33 ST	REET A	ADDRESS			
CITY-ST-ZIP				3.4 CiT	Y - ST -	ZIF			
TITLE	j		DELET			··		Change	\dashv
NAME				4.2 NA	ME		L	1 414 191	İ
STREET ADDRE	ESS			4.3 STH	EET AS	DORESS			
CITY - ST - ZIP				4.4 CiT	Y-ST.	ZIP			
TETLE			DELET					Change Addition	
NAME				5.2 NAM	λĒ			C Addition	
STREET ADORE	SS			53 STR	EFT AS	CORESS			Ì
CITY - ST - ZIP				54011	r-ST	Z/P			
TITLE			DEL ET					Change Addition	\dashv
NAME				6.2 NAM	/E				
STREET ADORES	ss			6.3 STRI	EET AD	DORESS			
CITY - ST - ZIP				6.4 City	61	פול			
14. I do he	reby certify that the	ne information supplie	d with this fling is voluntari	1 1	• • • • • • • • • • • • • • • • • • • •		r the exemption stated in Section 119.07(3)(k). Florid	da Statutoc Liturbas	_
oath; th	hat Lam an officer	or director of the cor	poration or the receiver or	tructus accessors	true . d to	and accurate	r the exemption stated in Section 119.07(3)(k). Floric a and that my signature shall have the same legal e report as required by Chapter 607, Florida Statutes	lect as if made under	
appear	rs in Block 12 or E	Block 13 if changed, o	r on an aftachment with a	n address.		enocate trib	report as required by Chapter 607, Florida Statutes	, and that my name	

SIGNATURE:

MATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

31/96 813-327-2628