FILED

(521)434-1019

4/30/01

## 2001 UNIFORM BUSINESS REPORT (UBR)

**DOCUMENT # N39949** 

SIGNATURE

## May 15, 2001 8:00 am Secretary of State 1. Entity Name 05-15-2001 90160 018 \*\*\*\*61.25 FISHIN' KIDS STAY CLEAN, INC. Principal Place of Business Mailing Address 7855 WILLOW SPRING DRIVE 7855 WILLOW SPRING DR D0051733 LAKE WORTH FL 33467 LAKE WORTH FL 33467 Mailing Address .O. B以 542133 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0246899 Not Applicable \$8.75 Additional Palm Beach 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent Address of Current Registered Agent Street Address (P.O. Box Number is Not Acceptable) SIMUNEK, DONALD R. 7855 WILLOW SPRING DRIVE, APT #715 LAKE WORTH FL 33467 Zip Code 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. K. SIMUNEK 9. Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be Trust Fund Contribution. Department of State FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. VPD Delete TITLE TITLE FINEBURG, LINDA NAME NAME STREET ADDRESS STREET ADDRESS 4232 S LANDAR DR CITY-ST-7IP CITY-ST-ZIP LAKE WORTH FL 33463 ☐ Delete TITLE Change TITLE SIMUNEK, DONALD R. NAME NAME STREET ADDRESS 7855 WILLOW SPRING DR #715 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LAKE WORTH FL PA TITLE ☐ Addition Delete TIT1 F KOENIG, JOHN J NAME NAME STREET ADDRESS 1551 FORUM PL, PO DRAW 3948 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH FL ☐ Channe ☐ Addition CCD ☐ Delete TITLE KEISER, WILLIAM NAME STREET ADDRESS 4125 PALM FOREST DR., SOUTH STREET ADDRESS CITY-ST-ZIP DELRAY BEACH FL 33445 ☐ Delete ☐ Change Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Change Addition TITLE TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify 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 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if