2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE AND TYPED OR PRINTED

NAME OF SIGNING OFFICER OR DIRECTOR

Feb 23, 2004 08:00 AM Secretary of State DOCUMENT # P00000051781 KRYSTAL CLEAR USA, INC. Principal Place of Business Mailing Address 102 OAK HILL AVE 102 OAK HILL AVE FORT WALTON BEACH, FL 32547 FORT WALTON BEACH, FL 32547 CR2E034 (10/03) 01082004 No Cha-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3648573 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent WILDER, JAMES R DO NOT WRITE 102 OAKHILL AVE FORT WALTON BEACH, FL 32547 IN THIS SPACE 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. I am familiar with, and accept the obligations of registered agent. Signature typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 \$5.00 May Be U00000060770 Trust Fund Contribution. Added to Fees 02/23/04-90053<u>-</u>.nng 150.nn 10. OFFICERS AND DIRECTORS PSTD TITLE NAME WILDER, ANDREW J STREET ADDRESS 102 OAK HILL AVE CHY-SI-ZIP FORT WALTON BEACH, FL 32547 TITLE NAME WILDER, JAMES R STREET ADDRESS 102 OAK HILL AVE FORT WALTON BEACH, FL 32547 CITY-ST ZIP HILE NAME STREET ADDRESS DO NOT WRITE City St. ZP TITLE IN THIS SPACE NAME STREET ADDRESS CITY ST ZIP TITLE NAME STREET ADORESS CITY ST-ZIP HILE NAME STREET ADDRESS CITY-ST-ZIP s not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information urate anythat my signature shall have the same legal effect as if made under oath; that I am an officer or director cute this jeport as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if 12. I hereby certify that the information supplied with this filling indicated on this report or supplemental report is true and of the corporation or the receiver or frustee empowered to changed, or on an attachment with an address, with all of

FILED

Daytime Phone *