## **2004 FOR PROFIT CORPORATION ANNUAL REPORT**

## **DOCUMENT # P00000071513**

1. Entity Name

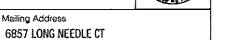
REAL CLEAN, INC.

Principal Place of Business

**6857 LONG NEEDLE CT** ORLANDO, FL 32800



**FILED** Apr 05, 2004 08:00 AM Secretary of State



ORLANDO, FL 32800

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR



02232004

No Chg-P

CR2E034 (10/03)

4. FEI Number 59-3660093 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

LOPEZ-HINZ, NORMAN

SIGNATURE:

## DO NOT WRITE

Date

Daytime Phone #

ORLANDO, FL 32800			IN THIS SPACE			
	named entity submits this statement for the priors of registered agent.	urpose of changing its registere	ed affice or re	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept	
SIGNATURE						
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		<ol> <li>Election Campaign Finan Trust Fund Contribution,</li> </ol>	ocing	\$5.00 May 8e Added to Fees		
10.	ÓFRICERS AND DIREC	TORS				
HILE NAME STREET ADDRESS CITY - ST - ZIP	D LOPEZ, EDGARDO L 6857 LONG NEEDLE CT ORLANDO, FL 32800				U00000103591 04/05/04-80063-003 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LOPEZ, MARTA 6857 LONG NEEDLE CT ORLANDO, FL 32800					
TITLE HAME STREET ADDRESS CITY-SI-ZIP	D LOPEZ-HINZ, NORMA 6857 LONG NEEDLE CT ORLANDO, FL 32800			DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE	
TRILE NAME STREET ADDRESS CRY-ST-ZIP						
THLE NAME STREET ADDRESS CRTY-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 supplierrental report is true and accurate and that the 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 recoived by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.						