2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 21, 2001 8:00 am
Secretary of State
05-21-2001 90037 034 ***158.75

DOCUMENT # P00000113510

1. Entity Name
ROBO-Clean, Inc.

Principal Place of Business: 7621 124th Ave #10, Largo, FL 33773
Mailing Address: Same

658716

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
7621 124th Ave #10	Same
Suite, Apt. #, etc.	Suite, Apt. #, etc.: same
City & State: Largo, FL	City & State: same
Zip: 33773 / Country: USA	Zip: 33773 / Country: USA

4. FEI Number: 59-3686222 — [X] Applied For / ☐ Not Applicable

5. Certificate of Status Desired [X] — $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
DAVID M. Glaser + Associates, Inc.
2177 Chantilly Ln.
Dunedin, FL 34698

7. Name and Address of New Registered Agent
Name: MARIE KELLY
Street Address (P.O. Box Number is Not Acceptable): 7621 124TH AVE N. #10
City: LARGO FL Zip Code: 33773

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.

SIGNATURE: Marie Kelly — DATE: 4-30-01
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2001 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ — $5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President / TODD A GREGORCIC / 7621 124Th Ave #10 / Largo, FL 33773	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
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CR2E034 (11/00)

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] TODD A. GREGORCIC — Date: 4/30/01 — Daytime Phone: 727-535-3775
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR