2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000130239

Entity Name: JOHNNY KLEEN INC.

FILED Feb 07, 2003 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

7692 WEST 29TH LANE SUITE 202 18611 N.W 47 CT.

HIALEAH, FL 33018 CAROL CITY, FL 33055

Current Mailing Address: New Mailing Address:

7692 WEST 29TH LANE SUITE 202 18611 N.W 47 CT.

HIALEAH, FL 33018 CAROL CITY, FL 33055

FEI Number: 72-1542037 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

RAMIREZ, PABLO J MONTES, CESAR A DP 7692 WEST 29TH LANE SUITE 202 MONTES, CESAR A DP 18611 N.W 47 CT.

HIALEAH, FL 33018 CAROL CITY, FL 33055

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: CESAR A. MONTES 02/07/2003

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP () Delete Title: DP (X) Change () Addition

Name: RAMIREZ, PABLO J Name: MONTES, CESAR A
Address: 7692 WEST 29TH LANE SUITE 202 Address: 18611 N.W 47 CT.

Address: 7692 WEST 29TH LANE SOITE 202 Address: 166TT N.W 47 CT.

City-St-Zip: HIALEAH, FL 33018 City-St-Zip: CAROL CITY, FL 33055

Title: DV (X) Delete Title: () Change () Addition

 Name:
 DEL PINO, ROLAND
 Name:

 Address:
 7692 WEST 29TH LANE SUITE 202
 Address:

 City-St-Zip:
 HIALEAH, FL 33018
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CESAR A. MONTES DP 02/07/2003