2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2005 8:00 am
Secretary of State
04-27-2005 90313 011 ***158.75

DOCUMENT # P03000031337

1. Entity Name
ORANGE POWER CLEANING PRODUCTS, INC.

Principal Place of Business	Mailing Address
~~9945 S.W. 215 ST.~~ ~~MIAMI, FL 33189~~	~~9945 S.W. 215 ST.~~ ~~MIAMI, FL 33189~~

04212005 Chg-P CR2E034 (10/03)

2. Principal Place of Business	3. Mailing Address
301 NW 36th Street	301 NW 36th Street
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Miami, Florida	City & State: Miami, Florida
Zip: 33127 Country:	Zip: 33127 Country:

4. FEI Number: 51-0453657 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

~~DELLUTRI, JOSEPH~~
~~9945 S.W. 215 ST.~~
~~MIAMI, FL 33189~~

7. Name and Address of New Registered Agent

Name: Dellutri, Salvatore
Street Address (P.O. Box Number is Not Acceptable): 301 NW 36th Street
City: Miami FL Zip Code: 33127

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: Salvatore Dellutri 4-22-05
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD DELLUTRI, JOSEPH ~~9945 S.W. 215 ST.~~ ~~MIAMI, FL 33189~~	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 301 NW 36th Street Miami, Florida 33127
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD NEFSKY, PETER E 9945 S.W. 215 ST. MIAMI, FL 33189	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD LOCKETT, BETTY J 9945 S.W. 215 ST. MIAMI, FL 33189	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☒ Addition VSTD Dellutri, Salvatore 301 NW 36 Street Miami, Florida 33127
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

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 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.

SIGNATURE: Salvatore Dellutri 4-22-05 (305) 576-8866
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #