

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 15, 2004 8:00 am
Secretary of State

03-15-2004 90017 029 ***150.00

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1. Entity Name

PRECE CLEAN, INC.



Principal Place of Business

2550 WINDHAM CT
DELRAY BEACH FL 33445

Mailing Address

2550 WINDHAM CT
DELRAY BEACH FL 33445

04010066

2. Principal Place of Business

5011 N. OCEAN BLVD

3. Mailing Address

5011 N. OCEAN BLVD

Suite, Apt. #, etc.

Suite, Apt. #, etc.



MOORE

CR2E034 (11/03)

City & State

OCEAN RIDGE FL

City & State

OCEAN RIDGE FL

4. FEI Number

20-0196139

Applied For

Not Applicable

Zip

33435

Country

USA

Zip

33435

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SHIELD, AMY D ESQ
20245 BACK NINE DR
BOCA RATON FL 33498

7. Name and Address of New Registered Agent

Name Rose Prece

Street Address (P.O. Box Number is Not Acceptable)
5011 N. Ocean Blvd.

City Ocean Ridge

FL

Zip Code 33435

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

Rose C. Prece

Signature, typed or printed name of registered agent and title if applicable.

Rose C. Prece

(NOTE: Registered Agent signature required when reinstating)

3/9/04

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P ☐ Delete
NAME PRECE, ROSE
STREET ADDRESS 2550 WINDHAM CT
CITY-ST-ZIP DELRAY BEACH FL 33445

TITLE V ☐ Delete
NAME PRECE, JOHN J JR
STREET ADDRESS 2550 WINDHAM CT
CITY-ST-ZIP DELRAY BEACH FL 33445

TITLE S ☐ Delete
NAME PRECE, JOHN J SR
STREET ADDRESS 2550 WINDHAM CT
CITY-ST-ZIP DELRAY BEACH FL 33445

TITLE T ☐ Delete
NAME PRECE, ANNE
STREET ADDRESS 2550 WINDHAM CT
CITY-ST-ZIP DELRAY BEACH FL 33445

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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STREET ADDRESS
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NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-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 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:

Rose C. Prece

Rose C. Prece

3/9/04

561-265-3534

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #