


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Oct 01, 2004 8:00 am
Secretary of State

10-01-2004 90002 030 ***150.00

DOCUMENT # P03000124721	
1. Entity Name CLEAN SWEEP PRESSURE WASHING, INC.	

Principal Place of Business 4070 BARCLAY DR PACE, FL 32571	Mailing Address 4070 BARCLAY DR PACE, FL 32571
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J4070010

2. Principal Place of Business Same as 1	3. Mailing Address Same as 1
Suite, Apt. #, etc. SAIL	Suite, Apt. #, etc. SAIL
City & State SAIL	City & State SAIL
Zip SAIL	Country SAIL



09092004 Chg-P CR2E034 (10/03)

4. FEI Number 90-0115140	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent EVANS, CHARLES 4070 BARCLAY DR PACE, FL 32571	
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	

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: *Charles D. Evans* DATE: 9-29-04

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$550.00 Due by September 8, 2004	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P EVANS, CHARLES 4070 BARCLAY DR PACE, FL 32571 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: *Charles D. Evans* DATE: 9-29-04

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

(P.O.) 9041 5957

Attachment
54073818

Doc. # P03000124721

Dear Florida Department of State
Subject: Clean Sweep Pressure Washing, Inc.
Ref. Number: P03000124721

9/29/04

This letter is in request to have the \$400.00 late fee removed to be able to Reincorporate. We did not receive a postcard notice in January of 2004 notifying us that it was time to Reincorporate. We received our postcard in August of 2004, notifying us it was time to Reincorporate. We do not feel nor does our CPA, as though we should have to pay this \$400.00 penalty fee. We did not receive a Profit Corporation Annual Report to fill out and return nor were we informed one was needed or we would have happily done so. We did submit a check for \$150.00 to you before the deadline, but it was returned to us. Check # 1510, enclosed for payment. We would have sent this letter sooner, but Hurricane Ivan disrupted our lives and business for a period of time.

Thank you for your understanding,
Charles D. Evans
Charles Evans Clean Sweep Pressure Washing, Inc.



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

September 9, 2004

CLEAN SWEEP PRESSURE WASHING, INC.
4070 BARCLAY DR
PACE, FL 32571

SUBJECT: CLEAN SWEEP PRESSURE WASHING, INC.

Ref. Number: P03000124727

There was not a completed annual report/uniform business report form submitted with your check. The enclosed form must be completed in its entirety and resubmitted with the filing fee.

We have received your check(s) totaling \$150.00; however it cannot be processed and is being returned for the following:

The fee to file the profit annual report is \$150.00 plus \$400.00 late fee for a total of \$550.00. If a certificate of status is desired, please add an additional \$8.75.

The only provision the Division of Corporations has for waiver of the \$400.00 late fee is if the annual report notice was not received. A letter stating this fact must accompany the completed annual report.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Katrina Sutphin

Letter Number: 304A00054045

OCT 1

Deadline

Send letter of
no receipt
1st post card