

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 08, 2006 8:00 am**  
**Secretary of State**

02-08-2006 90009 041 \*\*\*158.75

<b>DOCUMENT # P04000127674</b> 1. Entity Name <b>CLEANBREAK INVESTMENT INC.</b>					
Principal Place of Business <b>10849 FOREST RUN DRIVE BRADENTON, FL 34211</b>			Mailing Address <b>1851 MURRELL RD BAY NO. 076 ROCKLEDGE, FL 32955</b>		
2. Principal Place of Business <b>3222 CARAWAY ST</b>		3. Mailing Address <b>PO Box 237853</b>			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State <b>Cocoa FL</b>		City & State <b>Cocoa FL</b>		4. FEI Number <b>20-284756</b> Applied For <input type="checkbox"/> Not Applicable	
Zip <b>32926</b>		Country <b>USA</b>		5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
Zip <b>32923-7853</b>		Country <b>USA</b>		01262006 Chg-P CR2E034 (11/05)	
6. Name and Address of Current Registered Agent  <b>AMERICAN PIONEERS ADVISORY INC. 10849 FOREST RUN DRIVE BRADENTON, FL 34211</b>			7. Name and Address of New Registered Agent Name <b>GARY AUKER-HOWLETT</b> Street Address (P.O. Box Number is Not Acceptable) <b>3222 CARAWAY ST</b> City <b>Cocoa</b> <b>FL</b> Zip Code <b>32926</b>		
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 <b>G. AUKER-HOWLETT (PRESIDENT)</b> <i>[Signature]</i> <b>Feb 1st, 2006</b> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> <b>AUKER-HOWLETT, GARY W</b> <input checked="" type="checkbox"/> Delete <b>10849 FOREST RUN DRIVE</b> <b>BRADENTON, FL 34211</b>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> <b>AUKER-HOWLETT, GARY W</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>3222 CARAWAY ST</b> <b>Cocoa, FL 32926</b>	
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	
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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	
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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 exemptions contained in Chapter 119, 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: <i>[Signature]</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<b>Feb 1st 2006</b> <b>321 213 6450</b> <small>Date Daytime Phone #</small>		