

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Aug 09, 2006 08:00 AM
Secretary of State

DOCUMENT # P04000149238

1. Entity Name
HYDRO-KLEEN PRESSURE WASHING INC



Principal Place of Business
**840 HOLLY DR
JACKSONVILLE BEACH, FL 32250 US**

Mailing Address
**840 HOLLY DR
JACKSONVILLE BEACH, FL 32250 US**



08012006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-1811561	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**NEES, CHRISTIAN III
840 HOLLY DR
JACKSONVILLE BEACH, FL 32250**

**DO NOT WRITE
IN THIS SPACE**

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: *Eric Guise* *Eric Guise* *7/31/06*
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
Due by September 6, 2006**

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	NEES, CHRISTIAN III
STREET ADDRESS	1757 CHANDELIER CIR E
CITY-ST-ZIP	JACKSONVILLE, FL 32225
TITLE	S
NAME	GWISZ, ERIC E
STREET ADDRESS	840 HOLLY DR
CITY-ST-ZIP	JACKSONVILLE BEACH, FL 32250
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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08/09/06-80006-010 150.00

**DO NOT WRITE
IN THIS SPACE**

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:

Eric Guise
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/31/06
Date

904-759-3681
Daytime Phone #