

DOCUMENT # P93000051423			
1. Entity Name CHLOROTECH SYSTEMS, INC.			
Principal Place of Business 7098 BAYFRONT ROAD COCOA FL 32959-1354		Mailing Address P.O. BOX 1354 SHARPES FL 32959-1354	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent			
KLINE, MARVIN G 7098 BAYFRONT ROAD COCOA FL 32927			Name
			Street Address (
			City
8. The above named entity submits this statement for the purpose of changing its registered office or register			
SIGNATURE _____ (NOTE: Registered Agent signature required)			
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input type="checkbox"/>		FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of State	
11. OFFICERS AND DIRECTORS			
TITLE	D	<input type="checkbox"/> Delete	12.
NAME	KLINE, SAMMYE J		TITLE
STREET ADDRESS	7098 BAYFRONT RD		NAME
CITY-ST-ZIP	COCOA FL 32927		STREET ADDRESS
TITLE	D	<input type="checkbox"/> Delete	CITY-ST-ZIP
NAME	BUTLER, GWENDOLEN A.		TITLE
STREET ADDRESS	7094 BAYFRONT ROAD		NAME
CITY-ST-ZIP	COCOA FL 32927		STREET ADDRESS
TITLE		<input type="checkbox"/> Delete	CITY-ST-ZIP
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STREET ADDRESS			NAME
CITY-ST-ZIP</			

SIGNATURE: Wendolen A. Butler 4-14-00 321636-2188
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)