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Jan 15 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000070783 (4)

1. Corporation Name
CLEANPRO, INC.

Principal Place of Business
479 GREENSPRINGS CIRCLE
WINTER SPRINGS FL 32708

Mailing Address
479 GREENSPRINGS CIRCLE
WINTER SPRINGS FL 32708-3028



2. Principal Place of Business

21 312 PANAMA Circle

Suite, Apt. #, etc.
22 Winter Springs FL 32708

City & State
23 Winter Springs FL

Zip
24 32708

Country
25 U.S.A.

2a. Mailing Address

26 312 PANAMA Circle

Suite, Apt. #, etc.
27 Home

City & State
28 Winter Springs FL

Zip
29 32708

Country
30 U.S.A.

9. Name and Address of Current Registered Agent

IZZO, MICHAEL A
479 GREENSPRINGS CIRCLE
WINTER SPRINGS FL 32708

3. Date Incorporated or Qualified
10/12/1993

3a. Date of Last Report
06/25/1996

4. FEI Number

59-3204448

☒ Applied For
☐ Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0602 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent, and filed approval

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PT ☐ DELETE

NAME
IZZO, MICHAEL A.
STREET ADDRESS
479 GREENSPRINGS CIR.
CITY - ST - ZIP
WINTER SPGS. FL

TITLE VS ☐ DELETE

NAME
IZZO, MARY C.
STREET ADDRESS
479 GREENSPRINGS CIR.
CITY - ST - ZIP
WINTER SPGS. FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME
1.3 STREET ADDRESS 312 PANAMA CIRCLE
1.4 CITY - ST - ZIP

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS 312 PANAMA CIRCLE
2.4 CITY - ST - ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Michael A. Izzo Michael A. Izzo 1/9/97 (407) 695-1655

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0063137

CR2E034 (9/96)