

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P94000014744 (4)**

1. Corporation Name
CLEANTECH CORP.



Principal Place of Business: **10190 E. BAY HARBOR DR. #7F BAY HARBOR ISLAND FL 33154**
Mailing Address: **10190 E. BAY HARBOR DR. #7F BAY HARBOR ISLAND FL 33154**

3. Date Incorporated or Qualified: **02/23/1994** 3a. Date of Last Report: **03/20/1995**
4. FEI Number: **65-0469114**
5. Certificate of Status Desired: Applied For, Not Applicable
6. Election Campaign Financing Trust Fund Contribution: **\$8.75 Additional Fee Required**, **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes, No

2. Principal Place of Business: **21 1470 NE 125th TERRACE # 301 NORTH MIAMI, FL 33161 US**
2a. Mailing Address: **26 1470 NE 125th TERRACE # 301 NORTH MIAMI, FL 33161 US**

9. Name and Address of Current Registered Agent: **VILLELA, JOSE C 10190 E. BAY HARBOR DR. #7F BAY HARBOR ISLANDS FL 33154**

10. Name and Address of New Registered Agent: **81 Name: [Blank] 82 Street Address (P.O. Box Number is Not Acceptable): 1470 NE 125th TERRACE # 301 83 [Blank] 84 City: NORTH MIAMI FL 85 Zip Code: 33161**

11. Pursuant to the provisions of Sections 607.0502 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: _____ DATE: _____

12. OFFICERS AND DIRECTORS

TITLE	DP	<input type="checkbox"/> DELETE
NAME	VILLELA, JOSE C	
STREET ADDRESS	10190 E BAY HARBOR DR # 7F	
CITY-ST-ZIP	BAY HARBOR ISLAND FL 33154	
TITLE	S	<input type="checkbox"/> DELETE
NAME	LOPEZ, DENISE	
STREET ADDRESS	10190 E BAY HARBOR DR. 7F	
CITY-ST-ZIP	BAY HARBOR ISLAND FL 33154	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2. NAME	
3. STREET ADDRESS	1470 NE 125 th TERRACE # 301
4. CITY-ST-ZIP	NORTH MIAMI, FL 33161
5. TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6. NAME	
7. STREET ADDRESS	1470 NE 125 th TERRACE # 301
8. CITY-ST-ZIP	NORTH MIAMI, FL 33161
9. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
10. NAME	
11. STREET ADDRESS	
12. CITY-ST-ZIP	
13. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
14. NAME	
15. STREET ADDRESS	
16. CITY-ST-ZIP	
17. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
18. NAME	
19. STREET ADDRESS	
20. CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(r), 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 in change of, or on an attachment with an address

SIGNATURE: *[Signature]* DATE: **4-22-96** (305) 895-5445
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: **JOSE C. VILLELA**

CR2E034 (12/95)