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PROFIT CORPORATION ANNUAL REPORT

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NAME

STREET ADDRESS

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

Apr 14 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name P95000000220 (0)

CLEAN IMAGES CARPET CLEANING & DYEING, INC.

Principal Place of Business Mailing Address 27420 BREAKERS OR. 27420 BREAKERS DR. WESLEY CHAPEL FL 33543 WESLEY CHAPEL FL 33543 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/30/1994 2a. Mailing Address 2. Principal Place of Business 4. FEI Number Applied For 59-3288760 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be \Box 23 28 Trust Fund Contribution Added to Fees Zip Country 8. This corporation owes or has paid the current year Intangible Yes Yes 24 26 29 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name GLASS, JAMES A JR 27420 BREAKERS DR. 82 Street Address (P.O. Box Number is Not Acceptable) WESLEY CHAPEL FL 33543 83 Zip Code 11. Pursuant to the provisions of Soctions 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE 1.1 TITLE Change Addition NAME GLASS, JAMES A JR 1.2 NAME 27420 BREAKERS DR. STREET ADDRESS 1.3 STREET ADDRESS WESLEY CHAPEL FL 33543 CITY-ST-ZIP 14 CITY-ST-ZIP Change TITLE DELETE 21 TITLE Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST-ZIP DELETE Change Addition TITLE 3.1 THILE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE 4.1 TITLE ☐ Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADORESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE

6.2 NAME

14. I 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:

15. 4017 - 340 8

6.3 STREET ADDRESS