SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS DOCUMENT # P95000004528 (2) SPOTFREE CLEANING, INC. Principal Place of Business Mailing Address 420 OLD MAIN ST. 420 OLD MAIN ST. **BRADENTON FL 34205 BRADENTON FL 34205** 3. Date Incorporated or Qualified 3a. Date of Last Report 01/18/1995 2. Principal Place of Business 2a. Mailing Address Applied For 65-0559769 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Žφ Country 8. This corporation has liability for intangible tax under s. 199 032. 24 25 Yes No 29 30 Fiorida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name WALLACE, JAMES M Street Address (P.O. Box Number is Not Acceptable) 420 OLD MAIN ST. 82 **BRADENTON FL 34205** 83 84 City 85 Zip Code 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Signature, typed or product name of registered agent and offering applicable (NOTE: Registered Agent signature required which reinstating) 12 OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 CR2E034 (3/96) TITLE DELETE 1.1 TITLE Change Addition NAME WALLACE, JAMES M 1.2 NAME STREET ADDRESS 420 OLD MAIN ST. W 1.3 STREET ADDRESS CITY-ST-ZIP BRADENTON FL 34205 1.4 CITY - ST - ZIP TITLE DELETE 21 TITLE Change Addition 2.2 NAME STREET ADDRESS 2 3 STREET ADDRESS CITY-ST-ZIP 2 4 CHTY - ST - ZIP TITLE DELETE 31 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 33 STREET ADDRESS CITY-ST-ZIP 34 CHY+ST ZIP DELETE TITLE 4 1 TITLE Change Addition NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4 4 C'TY - ST - ZIP TITLE DELETE Change Addition 5.1 THILE NAME 5.2 NAME STREET ADDRESS 5 3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE TITLE 61 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6 4 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)(k). Florida Statutes 1 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 it made under oath that I ari an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block

SIGNATURE

June 26, 1996

941 746-7157

Daytimo Phone #