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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B Mortham
Secretary of State

1996 DIVISION OF CORPORATIONS

1990

DOCUMENT # P95000034531 (0)

ULTR	A CLEAN SERVICES, INC.				A TERMENEN DER TERRET BERMER BAUM BRUM	I BENK BERGE NIKE ENDER BURG HIND HALL IDEN	
Principal Place of Business Mailing Address							
312 E. NINE MILE ROAD. SUITE 11-161 312 E. NINE MILE ROAD. PENSACOLA FL 32514 PENSACOLA FL 32514			-161				
					3. Date Incorporated or Qualified 05/03/1995	3a. Date of Last Report	
2. Principal Place of Business		2a. Mailing Address	2a. Mailing Address		4. FEI Number	Applied For	
21		26			59 - 3310000	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc			5. Certificate of Status Desired	\$8.75 Additional	
City & State		Catal & Chata	·	·*************************************		Fee Required	
23		City & State		6. Election Campaign Financing	\$5.00 May Be		
Zφ	Country	Zip	Country	· · · · · · · · · · · · · · · · · · ·	Trust Fund Contribution	Added to Fees	
24	25	hand have here		<i>!</i>	8. This corporation has liability for intangible tax under s 199,032, Florida Statutes		
i .	9. Name and Address of Currer				10. Name and Address of New Ro		
			81	Name			
Barron, Jerry 312 E. Nine Mile Road, Suite 11-161			82	Street Add	reet Address (P.O. Box Number is Not Acceptable)		
			L	Officer, reco.	1655 II 70. Box (10/1100 to 110/1100 prost)	c <sub>l</sub>	
	COLA FL 32514		83				
			84	City		85 Zip Code	
d. Charles	10 4 007 000			1 '			
or registe familiar w	red agent, or both, in the State of Flori ith, and accept the obligations of, Sect	7 and 607, 1506, Frontid Statut da. Such change was authori fron 607,0505, Florida Statute	ites, the above- ized by the corp as.	named corpoi poration's boat	ration submits this statement for the purp ird of directors. Thereby accept the appo	pose of changing its registered office intment as registered agent. I am	
	Signature, typen or project distance of majorine, fluger)		¥. It: Bogisterad Age	r Esignature require	ad when revisit ting)	DATE	
12.	T	D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC		
TITLE	D D	☐ DELETE	1 1 TETLE			Change Addition	
NAME STOCK LARROSESS	Driatoti, opini		1.2 NAME		•		
STREET ADORESS	10010 CILLIOTIVAD HOAD		1.3 STREET ADDRESS				
CITY - ST - ZIP TITLE	PENSACOLA FL		2 1 TITLE	31 - 70P			
NAME	<del>-</del>	<del>-</del>		İ		Change Addition	
STREET ADDRESS	BARRON, DONA 10316 CHEMSTRAND ROAD		2.2 NAME.	**************************************			
CITY-ST-ZIP	1		2.3 STREET				
TITLE	FEIISAUUL IL	DELETE	2.4 CHY-5 3.1 THTLE	31-ZIP		Change Addition	
NAME			3.2 NAME			U change U Addition	
STREET ADDRESS				T ADDRESS			
CITY-ST-ZiP			34 CITY S				
TITLE		DELETE	4. 1 TITLE	11.7211		☐ Change ☐ Addition	
NAME		_	4.2 NAME			C outside C reserve	
STREET ADDRESS			4.3 S14EE1	ADDRESS			
CITY-ST-ZIP			4.4 CITY - S				
TITLE	☐ DELETE		5 1 TITLE			☐ Change ☐ Addition	
NAME			5.2 NAME	1			
STREET ADDRESS			5 3 S*REET	ADORESS			
CITY-ST-ZIP			5 4 CITY - S				
TITLE		DELETE	6 1 TiTc€			Change Addition	
NAME			6.2 NAME			·	
STREET ADDRESS			63 STREET	ADDRESS			
CITY-ST-ZIP			6.4 CITY - S	i1 - 719			

14. I do hereby certify that the information supplied with this filing is voluntarily turnished and close not qualify for the exemption stated in Section 119.07(3)(k). 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

ONG Parties Tone Barron

4-30-96

904-476 4667