## FILE NOW: FILING FEE AFTER MAY 1 IS \$2 **PROFIT** FLORIDA DEPARTMENT DE STATE CORPORATION Sandra B. Morth ANNUAL REPORT Secretary of Sta DIVISION OF CORPOR CHONS 1996 P95000034998 (1) **DOCUMENT #** Corporation Name BIO-CLEAN INTERNATIONAL, INC. Mailing Address Principal Place of Business 1890 S.W. 70TH AVE 1890 S.W. 70TH AVE. PLANTATION FL 33317 PLANTATION FL 33317 3a. Date of Last Report 3. Date Incorporated or Qualified 05/01/1995 FIRST 4. FEI Number Applied For 2. Principal Place of Business 2a. Maling Address 65-0585139 Not Applicable 5300 N.W. 33 SAME 26 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. Certificate of Status Desired Fee Required 219 27 City & State 6. Election Campaign Financing \$5.00 May Be City & State Trust Fund Contribution Added to Fees 23 FT. 28 8. This corporation has liability for intangible tax under s. 199.032. Country Zip Florida Statutes ☐ Yes ☐ No 33309 25 USA 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name ENNIS, JERRY D Street Address (P.O. Box Number is Not Acceptable) 82 1890 S.W. 70TH AVE. 83 **PLANTATION FL 33317** 85 Zip Code City 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12 Change Addition [ ] DELETE THE 1.1 TIBEE PRESIDENT 1.2 NAME NAME BRYAN CAMPBELL 2920 ME. 23 MPL 1.3 STREET ADDRESS STREET ADDRESS PomPANO FLORIDA 33062 []DELEH 14 CHY ST ZIP CITY - ST - 712 Change Addition 2.1 DUE TIPLE Secretary Serryennis 2.2 NAME NAME 1890 S. W. 70Th ANG 2.3 STREET ADORESS STREET ADDRESS PLANTATION, PLOISIDE 33317 2.4 CITY - ST - ZIP CITY-ST-ZIP Change Addition 3.1.600 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CITY - ST - ZIP CITY - \$1 - 7/P Change Addition DELETE 4.1 DEE TITLE

6.4 CHY+S1-ZiP 14. I do hereby certify that the information supplied with this filing is voruntarily furnished and does 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 eath; that I am an officer or director of the comporation 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.

4.2 NAME

5.1 THUE

5.2 NAME

6 1 TUTLE

6.2 NAME

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - S\* - 7:8

4.4 CITY - ST - ZIP

SIGNATURE:

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY - S" - 7IP

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DELETE

DELETE

5-28-96 954/497-2353

Cnange

Addition

ncitibbA 🔲

CR2E034 (12/95)