## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

Mailing Address

340 W. 78TH RD.

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

340 W. 78TH RD.



FLORIDA DEPARTMENT OF STATE

FILED

Feb 11 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P95000038129 (9)

NATIONAL CLEANROOMS, INC.

HIALEAH FL 33014 HIALEAH FL 33014-4323 US 3. Date incorporated or Qualified 3a. Date of Last Report 05/12/1995 06/19/1996 4. FEI Number 65 -06 75 2. Principal Place of Business Applied For 28. Mailing Address APPLIED FOR Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, Yes No 30 Florida Statutes 24 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent **B1** Name D'ANDREA, ANTHONY 340 W. 78TH RD 82 Street Address (P.O. Box Number is Not Acceptable) HIALEAH FL 33104 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. 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 fit ail applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)DELETE Change Addition 1.1 TITLE THIE D'ANDREA, ANTHONY 1.2 NAME NAME 340 W. 78TH RD. 1.3 STREET ADDRESS STREET ADORESS HIALEAH FL 1.4 CITY - ST - ZIP CHTY-ST-ZIP DELETE Change Addition 2.1 TITLE TITLE NAME **2.2 NAME** 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIF DELETE Change \_\_ Addition 3.1 TITLE TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 34. CITY-ST-ZIP CITY - S1 - 7IP DELETE Addition 41 TITLE Change TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 City - St - ZiP CHTY - ST - 7P DELETE Change \_\_\_ Addition THEF 5.1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY: ST-ZiF DELETE Change \_\_\_ Addition 6.1 TITLE TITLE 62 NAME NAME STREET ADDRESS **6.3 STREET ADDRESS** 6.4 CITY-ST-ZIP CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Fiorida 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