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FILED
May 01 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000045312 (2)

1. Corporation Name

BIO-CLEAN MARKETING GROUP, INC.

Principal Place of Business

2200 CORPORATE BLVD. NW. SUITE 314C
BOCA RATON FL 33431

Mailing Address

2200 CORPORATE BLVD. NW. SUITE 314C
BOCA RATON FL 33431-7387



3. Date Incorporated or Qualified

06/06/1995

3a. Date of Last Report

04/30/1996

2. Principal Place of Business

21 Bio Clean Marketing

2a. Mailing Address

26 Bio Clean Marketing

Suite, Apt. #, etc.

22 1025 NW 17th Ave

Suite, Apt. #, etc.

27 1025 NW 17th Ave

City & State

23 Delray Beach FL

City & State

28 Delray Beach FL

Zip

24 33445

Country

25 USA

Zip

29 33445

Country

30 USA

4. FEI Number

65-0591759

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

MICHAEL FABRIZI/CPN/PPD INC.
2200 CORPORATE BLVD. NW. SUITE 314C
BOCA RATON FL 33431

10. Name and Address of New Registered Agent

81 Name

MICHAEL FABRIZI

82 Street Address (P.O. Box Number is Not Acceptable)

1025 NW 17th Ave

83

84 City

Delray Beach

FL

85 Zip Code

33445

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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

4/22/97

12. OFFICERS AND DIRECTORS

TITLE D
NAME FABRIZI, MICHAEL J
STREET ADDRESS 2200 CORPORATE BLVD. NW. SUITE 314C
CITY-ST-ZIP BOCA RATON FL 33431 ☐ DELETE

TITLE D
NAME GUALTIERI, JOSEPH
STREET ADDRESS 2200 CORPORATE BLVD. NW. SUITE 314C
CITY-ST-ZIP BOCA RATON FL 33431 ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS 1025 NW 17th Ave
1.4 CITY-ST-ZIP DELRAY BEACH FL 33445

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS 1025 NW 17th Ave
2.4 CITY-ST-ZIP DELRAY BEACH FL 33445

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 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), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/22/97

Date

800 272 3647

Daytime Phone #

CR2E034 (9/96)