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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000082624

THE CLEAN CUTTERS, INC.

FILED Mar 29, 1999 8:00 am Secretary of State

03-29-1999 90055 042 ***150.00



Principal Place of Business 9267 RAMBLEWOOD DR., APT. 1412 CORAL SPRINGS FL 33071 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified	
CORAL SPRINGS FL 33071 CORAL SPRINGS FL 33071 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified	
DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified	
3. Date Incorporated or Qualifed	
1 10/27/100E	
2. Principal Place of Business 2a. Mailing Address 2. App	ied For
1170C 11007 -TOV 11709 1111 92 1111 05-05-05-17	Applicable
21 4 4 5 100 65-0619517 Not Suite, Apt. #, etc. \$8.75 Ac	
5. Certificate of Status Desired LI 5. Fee Poor	
22 27	lov Bo
23 (DYA) SOLIDS FUZE COX SOLIDS Trust Fund Contribution Added to	•
Zip Cowath Zip Coyantry 8. This corporation owes the current year Intangible	
	ENo.
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent	
NORDIS CERALD	
NORRIS, GERALD 82 Street Address (P.O. Box Number is Not Acceptable)	
7970 SW 164 ST 37 ST 400 SW 164 ST	
MIAMI FL 33157	
84 City COLO S FL 85 Zip C	ode
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 r	egistered
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 roffice 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 reg agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.	stered
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SIGNATURE Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstalling) DATE UNDER DATE	
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14. I hereby certify that the information supplied with this filling 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, with all other like empowered.

SIGNATURE: