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

PROFIT CORPORATION **ANNUAL REPORT**

1997

<u>3536 Elsenhower Dr.</u>

FABAL, RANDOLPH A 1519 DALE MABRY HWY #100

LUTZ FL 33549



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

POCUMENT # P96000019357 (8)

Pasco

Signature, typed or printed name of registered agent and trie if applicable

OSTERHOUDT, NICHOLAS R

3536 EISENHOWER DR

OSTERHOUDT, ALECIA A

3536 EISENHOWER DR

HOLIDAY FL 34691

HOLIDAY FL 34691

OFFICERS AND DIRECTORS

CLEAN PLAY, INC.

City & State

SIGNATURE

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-2IP

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-7IP

12.

TITLE

NAME

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NAME

Holiday

Principal Place of Business	Mailing Address	•
3536 EISENHOWER DR HOLIDAY FL 34691	3536 EISENHOWER DR HOLIDAY FL 34691-3313	

27

FILED May 15 1997 8:00am Secretary of State

Change

Change

■ Addition

Addition



64 CITY- \$1-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.

4.3 STREET ADDRESS

5.3 STREET ADORESS

6.3 STREET ADDRESS

5.4 CITY - ST- ZIP

4.4 CHY: \$1-2IP

5 1 TITLE

5.2 NAME

6.1 THLE

62 NAME

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DA SELECTION OF