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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

DOCUMENT # P96000021553 (8)

CLEAN BEST, CORP.

## FILED Mar 30 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 395 NE 21ST STREET #107 395 NE 21ST STREET #107 **MIAMI FL 33137** MIAMI FL 33137 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/08/1996 2a. Mailing Address Applied For 2. Principal Place of Business 4. FEI Number 26 65-0651149 Not Applicable 21 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 Trust Fund Contribution Added to Fees 28 Zip Country Zip Country 8. This corporation owes or has paid the current year intangible Yes □ No 24 25 29 30 Personal Property Tax due June 30. g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name Correa, Luis F Jr 395 NE 21ST STREET #107 82 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33137** 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 printing name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition DELETE PD TITLE 1.1 TITLE CORREA, LUIS F JR NAME 1.2 NAME 395 NE 21ST STREET #107 STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33137** 1.4 CITY - ST- ZIP CITY-ST-ZIP VSD DELETE Change Addition TITLE 2.1 TITLE CORREA, LUIS G NAME 2.2 NAME 395 NE 21ST STREET #107 STREET ADDRESS 2.3 STREET ADDRESS **MIAMI FL 33137** CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY+ST-ZIP CITY-ST-ZIP DELETE ☐ Change ☐ Addition 4.1 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP ☐ DELETE ☐ Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST- ZIP Change DELETE 6.1 TITLE ☐ Addition TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP

14. Thereby 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 on an attachment with an address.

3-15-98