

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

FILED
Feb 14 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 # P96000045706 (4)

1. Corporation Name
QUALITY CLEAN OF TAMPA BAY, INC.



Principal Place of Business: 3846 FOXRIDGE BOULEVARD WESLEY CHAPEL FL 33543
Mailing Address: 3846 FOXRIDGE BOULEVARD WESLEY CHAPEL FL 33543-6115

3. Date Incorporated or Qualified: 05/22/1996
3a. Date of Last Report

2. Principal Place of Business: 21 3922 FOXRIDGE BLVD. Suite, Apt. #, etc.
2a. Mailing Address: 26 3922 FOX RIDGE BLVD. Suite, Apt. #, etc.

4. FEI Number: 59-3379358
Applied For: Not Applicable

22. City & State: WESLEY CHAPEL, FL.
27. City & State: WESLEY CHAPEL, FL.

5. Certificate of Status Desired: \$8.75 Additional Fee Required

23. Zip: 33543, County: PASCO
28. Zip: 33543, County: PASCO

6. Election Campaign Financing: Trust Fund Contribution \$5.00 May Be Added to Fees

24. Name and Address of Current Registered Agent: PINEIRO, JOSE A 7111 PAULA DRIVE TAMPA FL 33615

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

10. Name and Address of New Registered Agent: 81 Name, 82 Street Address (P.O. Box Number is Not Acceptable), 83, 84 City, 85 Zip Code (FL)

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: Jose A. Pineiro, JOSE A. PINEIRO PRESIDENT, DATE: 1-27-97

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	PINEIRO, JOSE A	
STREET ADDRESS	711 PAULA DRIVE	
CITY-ST-ZIP	TAMPA FL 33615	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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: Jose A. Pineiro, JOSE A. PINEIRO, DATE: 1-27-97, (813) 881-0629

CR2E034 (9/96)