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PROFIT CORPORATION ANNUAL REPORT

1997



appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE:

FLORIDA DEPARTMENT OF STATE

FILED

May 12 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P96000061115** (7)

VERO CLEAN, INC.

Principal Piace of Business Mailing Address 3101 AVIATION BLVD. 3101 AVIATION BLVD. UNIT H UNIT H VERO BEACH FL 32960-7821 VERO BEACH FL 32960 3. Date Incorporated or Qualified 3a. Date of Last Report 07/22/1996 2. Principal Place of Business 2a. Mailing Address Applied For 21 Not Applicable 26 Suite, Apt. #, etc. \$8.75 Additional Suite, Ant. #, etc. \Box 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution П 23 28 Added to Fees Country Zφ Country Zip This corporation has liability for intangible tax under s. 199.032, Yes No 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent REINHART, JOANN 3101 AVIATION BLVD. Street Address (P.O. Box Number is Not Acceptable) UNIT H VERO BEACH FL 32960 83 Zip Code 84 City 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Signature, typical or printed name of registered agont and trie if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13, Change Addition 1.1 TITLE THE 1.2 NAME NAME 1.3 STREET ADDRESS STREET ADDRESS 12960 1.4 CITY - ST - ZIP CHY- \$1, 20 DELETE 2.1 TITLE Change Addition HILLE 2.2 NAME NAME 2.3 STREET ADDRESS SIDECT ADDRESS 2.4 CITY-ST-ZIP CHY-\$1-205 DELETE Change Addition 3.1 TITLE HILE 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. City-ST-ZIP CHY St Zin DELETE Change Addition 4.1 TITLE THEF NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 City-St-ZiP CHY-\$1-ZIP ☐ Change Addition DELETE 5.1 TIYLE 1 ILE NAME 5.2 NAME STREET ASIDRESS 5.3 STREET ADDRESS CHY SI-Ze 5.4 CITY - ST - ZIP DELETE Change Addition 6.1 TITLE THEF 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP CITY ST-ZIF 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

Keinhart