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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P96000065384

1. Corporation Name

CENTRA CLEAN, INC.

FILED Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90150 047 ***150.00



							a l 1884
Principal Place	of Business	Mailing Address					
4028 WITTWOOD COURT ORLANDO FL 32817		4028 WITTWOOD COURT ORLANDO FL 32817			DO NOT WRITE IN THIS SPACE		
						3. Date Ir corporated or Qualifed	
						08/05/1996	
2 Principa Di	ace of Business	2a. Mailing Address				4. FEI Number Applied F	or
2. Principa Place of Business		26				59-3392480 Not Appli	
Suite, Apt.	# etc.	Suite, Apt. #, etc.					
5	,, 0.0.	27				5. Certificate of Status Desired Fee Recuired	
City & S ate	9	City & State				6. Election Campaign Financing \$5.00 May B	3e
23		28				Trust Fund Contribution Added to Feet	
Zip	Country	Zip	Cou	ntry		8. This corporation owes the current year Intangible	
24	25	29	30			Personal Property Tax. ☐ Yes ☐ No	,
	9. Name and Add ess of Curren	t Registered Agent		L.,		10. Name and Address of New Registered Agent	
				81	Name		
	PBELL, LORI L			82	Street Add	dress (P.O. Box Number is Not Acceptable)	
	3 E. HIGHWAY 50			Ш			
CLE	RMONT FL 34711			83			
				84	City	85 Zip Code	
					•	orporation submits this statement for the purpose of changing its register.	
SIGNATURE	m familiar with, and accept the obliga				signature require	u red when reinstating) DATE	_
12.	OFFICERS AN	IC DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	
TITLE	P	☐ DELETE	1.1 TO	TLE		Change	Addition
NAME	HOPSON, REBECCA A		12 N	AME	İ		
STREET ADDRESS	4028 WITTWOOD COURT		1.3 5	TREET A	ADDRESS		
CITY-ST-ZIP	ORLANDO FL		140	ITY-ST-	ZIP		
TITLE	-	□ DELETE	2.1 TI	TLE	l	☐ Change	Addition
NAME			2 2 N	AME.			
STREET ADDRESS			2.3 S	TREET	ADDRESS		
CITY-ST-ZIP			2.40	ITY-ST	- ZIP		
TITLE		☐ DELETE	3.1 Tĭ	TLE	Ì	☐ Change ☐	Addition
NAME			3.2 N	AME			
STREET ADDRESS			33S	TREET	ADDRESS		
CITY-ST-ZIP		_ <u></u>		ITY-ST	-ZiP		Addista
TITLE		☐ DELETE	4 1 TI			Change	Addition
NAME			4 2 N		}		i
STREET ADDRESS					ADDRESS		
CITY-ST-ZIP				ITY-ST-	ZIP	Change .	Addition
TITLE		☐ DELETE	5.1 T			☐ Change ☐	Addition
NAME			5.2 N		ADDRESS		
STREET ADDRESS			1		ADDRESS		
CITY-ST-ZIP			54 C	ITY-\$T-	4117	Change	Addition
TITLE		☐ DELETE				Collable C	, againeri
NAME			6.2 N		ADDDESS		ļ
STREET ADDRESS			i		ADDRESS		
CITY ST 71D			■ 6.4 C	ITY-ST-	ZIP		

14. 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 Chapte 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: Rebeat A.