

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

FILED

Feb 02 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000076434 (5)

1. Corporation Name
CLEAN AIR TECHNOLOGIES, INC.

Principal Place of Business	Mailing Address
4340 NW 19TH AVENUE, BAY D POMPANO BEACH FL 33064	4340 NW 19TH AVENUE, BAY D POMPANO BEACH FL 33064



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business: 21 381 SE 7 Ave. Suite, Apt. #, etc.		2a. Mailing Address: 25 381 SE 7 Ave. Suite, Apt. #, etc.		3. Date Incorporated or Qualified 09/12/1996	
22 City & State 23 Pompano Beach		27 City & State 28 Pompano Beach		4. FFI Number 65-0700360	
24 33060		29 33060		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
25 Broward		30 Broward		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
9. Name and Address of Current Registered Agent BOSWORTH, ALLEN 507 SE 11TH COURT FORT LAUDERDALE FL 33316				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ 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	
				FL 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: Darla Thompson DATE: 1-20-98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	11 TITLE	
NAME	THOMPSON, DAVID	12 NAME	
STREET ADDRESS	5969 NW 75TH WAY	13 STREET ADDRESS	
CITY-ST-ZIP	PARKLAND FL 33067	14 CITY-ST-ZIP	
TITLE	STD	21 TITLE	
NAME	THOMPSON, DARLA	22 NAME	
STREET ADDRESS	5969 NW 75TH WAY	23 STREET ADDRESS	
CITY-ST-ZIP	PARKLAND FL 33067	24 CITY-ST-ZIP	
TITLE		31 TITLE	
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY-ST-ZIP		34 CITY-ST-ZIP	
TITLE		41 TITLE	
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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: Darla Thompson 1-20-98 954-971-4567

CR2E034 (10/97)