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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000104468 (9)

FILED Jan 20 1998 8:00am Secretary of State

CLEAN	I IMAGE, INC.				
Principal Plac	ce of Business	Mailing Address			T SEALUGAL SAR INKEN DAIN BEAM DEAN ENDIN LEGAL BEAM BEAM BINN BINN BINN BINN BINN BINN BINN BIN
4473 PONDS DRIVE 4473 PONDS DRIVE					
COCOA FL		COCOA FL 32927			DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualified
					01/01/1997
2. Principal F	Place of Business	2a, Mailing Address			4 FELNumber Applied For
21		26			59-3425522 Not Application
Suite, Apt. #, etc.		Suite, Apt. #, etc.			\$8.75 Additional
22		27			5. Certificate of Status Desired Fee Required
City & State		City & State			6. Election Campaign Financing \$5.00 May Be
3		28			Trust Fund Contribution
Zip	Country	Zip Country		y	This corporation owes or has paid the current year Intangible
24]	25	29	30		Personal Property Tax due June 30. Yes No
	g. Name and Address of Curre	nt Hegistered Agent	81	Namo	10. Name and Address of New Registered Agent
ERICASON, CENTRIA J					
	73 PONDS DRIVE		82	Street Add	ress (P.O. Box Number is Not Acceptable)
C	OCOA FL 32927		83	ļ	
			00	<u>'</u>	
			84	City	85 Zip Code
44 Duraugal	to the previous of Sections 607 05	02 and CO7 1509 Florido Statu	too the abov	o pomod oor	FL
office or i	registered agent, or both, in the State	oz and 607. 1306, rionda statu e of Florida. Such change was	authorized b	y the corpora	poration submits this statement for the purpose of changing its registere ation's board of directors. I hereby accept the appointment as registered
agent. I a	am familiar with, and accept the oblig	jations of, Section 607.0505, F	lorida Statute	18.	
SIGNATURE	Stanature, typed or printed name of registered ag	and and title if smallerable (NO	74 : Ronistored Ac	ent signature rozu	gred when relistating) DATE
12.		ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	DELETE	1.11111.E		Change Addition
NAME	ERICKSON, CYNTHIA J		1.2 NAME		
STREET ADDRESS 4473 PONDS DRIVE			1,3 STREE	T ADORESS	
CITY-ST-ZIP	COCOA FL 32927	DCOA FL 32927		ST-ZIP	
TITLE	D	☐ DELETE	2.1 TITLE		Change Addition
NAME	HURST, WILLIAM C		2 2 NAME		
STREET ADDRESS	7000 ENTERPRISE ROAD		2.3 STREE	T ADDRESS	
CITY-ST-ZIP	COCOA FL 32927		2 4 C(TY-	ST-ZIP	•
TITLE		DELETE	3 1 THILE		☐ Change ☐ Addition
NAME			3.2 NAME	1	
STREET ADDRESS			3.3 STREE.	1 ADDRESS	
CITY-ST-ZIP			3.4. CITY-	\$1 - 7IP	
TITLE		☐ DECETE	4.1 TITLE		Change Addition
NAME			4.2 NAME	ļ	
STREET ADDRESS			4.3 STREE	T ADDRESS	
CITY-ST-ZIP			4.4 CITY-	ST-ZIP	
TITLE		DELETE	5.1 TITLE	ļ	Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREE	1 ADDRESS	
CHTY-ST-ZIP			5.4 CITY-	S1 - Z IP	
TETLE		☐ DELETE	61 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS I			63STR{E	I ADDRESS	
CITY-ST-ZIP			6.4 CITY-1	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)(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 offect 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.

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19. KUDE