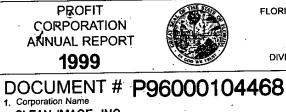
FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999

CLEAN IMAGE, INC.



Secretary of State DIVISION OF CORPORATIONS

FILED FLORIDA DEPARTMENT OF STATE Jan 25, 1999 8:00am Katherine Harris **Secretary of State**

01-25-1999 90038 010 ***150.00

Principal Place of Business Mailing Address					
473 PONDS DRIVE 4473 PONDS DRIVE COCOA FL 32927 COCOA FL 32927			DO NOT WRITE IN THIS SPACE		
			Date Incorporated or Qualifed 01/01/1997	:	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For	
7	26		59-3425522	Not Applicable	
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip Country	Zip 30	Country	This corporation owes the current year Personal Property Tax.	☐ Yes 【X No	
9. Name and Address of C		<u> </u>	10. Name and Address of New Register	red Agent	
ERICKSON, CYNTHIA J 4473 PONDS DRIVE			Address (P.O. Box Number is Not Acceptable)		
COCOA FL 32927		83			

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

City

SIGNATURE	Signature, typed or printed name of registered agent and title if applic	able. (NOTE: R	egistered Agent signature required	1 when reinstating)	DATE	
2.	OFFICERS AND DIRECTORS 13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		RS IN 12
TLE	D	☐ DELETE	1.1 TITLE		Change	☐ Addition
AME	ERICKSON, CYNTHIA J		1.2 NAME			
REET ADDRESS	4470 DONDE DONE		1.3 STREET ADDRESS		!	
Y-ST-ZIP	COCOA FL 32927		1.4 CITY-ST-ZIP	·		
1-31- <u>21</u> F	D	☐ DELETE	2.1 TITLE		☐ Change	☐ Addition
ME	HURST, WILLIAM C		2.2 NAME			
REET ADDRESS	7000 ENTERPRISE ROAD		2.3 STREET ADORESS			
TY-ST-ZIP	COCOA FL 32927	, 	2:4 CITY-ST-ZIP		<u> </u>	
T-51-21P LE		☐ DELETE	3.1 TITLE		☐ Change	Addition
ME 4 TO			3.2 NAME			
1,1	70 your		3.3 STREET ADDRESS		are but the same of the same o	13.1
REET ADDRESS	The second of th		3.4, CITY-ST-ZIP			1.3
Y-ST-ZIP LE		☐ DELETE	4.1 TITLE		☐ Change	
			4. 2 NAME	•		
ME DEET ADDRESS		•	4.3 STREET ADDRESS		•	
REET ADDRESS			4.4 CITY-ST-ZIP			
ry-st-zip		DELETE	5.1 TITLE	-	. Change	☐ Addition
LE	•		5.2 NAME			
ME			5.3 STREET ADDRESS		¥ - \$	
REET ADDRESS			5.4 CITY-ST-ZIP	•		
Y-ST-ZIP		☐ DELETE	6.1 TITLE		☐ Change	Addition
RE		Coccere	6.2 NAME			
AME			6.3 STREET ADDRESS			
TREET ADDRESS	Fig. 1		1			
TV_ST_7IP	1 90		6.4 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)(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, with all other like empowered.

SIGNATURE: C