


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 22, 2005 8:00 am
Secretary of State

02-22-2005 90022 001 ***150.00

DOCUMENT # P97000016443 1. Entity Name SUPERCLEAN DISTRIBUTORS, INC.																																			
Principal Place of Business 4631 N.W. 31ST AVENUE SUITE 247 FT LAUDERDALE, FL 33309		Mailing Address 4631 N.W. 31ST AVENUE SUITE 247 FT LAUDERDALE, FL 33309																																	
2. Principal Place of Business 1300 BRICKELL DR Suite, Apt. #, etc.		3. Mailing Address 1300 BRICKELL DR Suite, Apt. #, etc.																																	
City & State FT LAUDERDALE, FL Zip 33301 Country		City & State FT LAUDERDALE, FL Zip 33301 Country																																	
4. FEI Number 65-0732235		Applied For <input type="checkbox"/> Not Applicable																																	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required																																	
6. Name and Address of Current Registered Agent CUTRO, CINDY 4631 N.W. 1ST AVENUE SUITE 247 FT LAUDERDALE, FL 33309		7. Name and Address of New Registered Agent Name Cindy Cutro Herd Street Address (P.O. Box Number is Not Acceptable) 1300 BRICKELL DR City FT LAUDERDALE FL Zip Code 33301																																	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u><i>Cindy Herd</i></u> 1-20-05 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>																																			
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																																	
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">TITLE NAME STREET ADDRESS CITY-ST-ZIP</td> <td style="width: 70%;"> P CUTRO, CINDY 4631 NW 1ST AVE, SUITE 247 FT LAUDERDALE, FL 33309 <input type="checkbox"/> Delete </td> </tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> </table>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CUTRO, CINDY 4631 NW 1ST AVE, SUITE 247 FT LAUDERDALE, FL 33309 <input type="checkbox"/> Delete															11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">TITLE NAME STREET ADDRESS CITY-ST-ZIP</td> <td style="width: 70%;"> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1300 BRICKELL DR FT LAUDERDALE, FL 33301 </td> </tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> </table>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1300 BRICKELL DR FT LAUDERDALE, FL 33301														
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12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.																																			
SIGNATURE: <u><i>Cindy Herd</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date <u>1-20-05</u> (954) 448-4775 <small>Daytime Phone #</small>																																	

Department of Health - Vital Statistics
STATE OF FLORIDA
MARRIAGE RECORD
 TYPE IN UPPER CASE
 USE BLACK INK

This license not valid unless seal of Clerk,
 Circuit or County Court, appears hereon.

Attachment P170001613

(STATE FILE NUMBER)

40021300

DATE RETURNED: .. DEC.15 2003....

RECORDED: BOOK 346 PAGE 3318

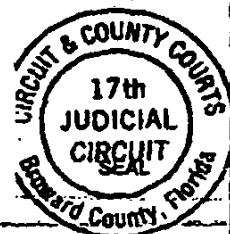
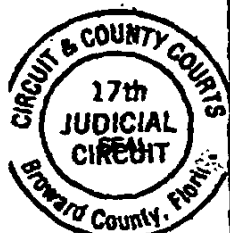
HOWARD C. FORMAN , CLERK OF COURT

BY . ATG., DEPUTY CLERK

ML-SO-03-001461

(APPLICATION NUMBER)

APPLICATION TO MARRY			
1. GROOM'S NAME (First, Middle, Last) ADOLPHUS CROCKETT HERD		2. DATE OF BIRTH (Month, Day, Year) MAR 23, 1943	
3a. RESIDENCE - CITY, TOWN, OR LOCATION HOLLYWOOD	3b. COUNTY BROWARD	3c. STATE FLORIDA	4. BIRTHPLACE (State or Foreign Country) TEXAS
5a. BRIDE'S NAME (First, Middle, Last) CINDY ANN CUTRO		5b. MOTHER'S SURNAME (if different)	
6. DATE OF BIRTH (Month, Day, Year) JUN 15, 1965		7. BIRTHPLACE (State or Foreign Country) NEW JERSEY	
7a. RESIDENCE - CITY, TOWN, OR LOCATION HOLLYWOOD	7b. COUNTY BROWARD	7c. STATE FLORIDA	8. BIRTHPLACE (State or Foreign Country) NEW JERSEY
<p>WE, THE APPLICANTS NAMED IN THIS CERTIFICATE, EACH FOR HIMSELF OR HERSELF, STATE THAT THE INFORMATION PROVIDED ON THIS RECORD IS CORRECT TO THE BEST OF OUR KNOWLEDGE AND BELIEF, THAT NO LEGAL OBJECTION TO THE MARRIAGE NOR THE ISSUANCE OF A LICENSE TO AUTHORIZE THE SAME IS KNOWN TO US AND HEREBY APPLY FOR LICENSE TO MARRY.</p>			
9. SIGNATURE OF GROOM (Sign in black ink using black ink) <i>Adolphus Crockett Herd</i>		10. SUBSCRIBED AND SWORN TO BEFORE ME ON (DATE) OCT 24, 2003	
11. TITLE OF OFFICIAL DEPUTY CLERK DIANE BOTTA		12. SIGNATURE OF OFFICIAL (Sign in black ink) <i>Diane Botta</i>	
13. SIGNATURE OF BRIDE (Sign in black ink using black ink) <i>Cindy Ann Cutro</i>		14. SUBSCRIBED AND SWORN TO BEFORE ME ON (DATE) OCT 24, 2003	
15. TITLE OF OFFICIAL DEPUTY CLERK DIANE BOTTA		16. SIGNATURE OF OFFICIAL (Sign in black ink) <i>Diane Botta</i>	
<p>LICENSE TO MARRY</p> <p>AUTHORIZATION AND LICENSE IS HEREBY GIVEN TO ANY PERSON, DULY AUTHORIZED BY THE LAWS OF THE STATE OF FLORIDA TO PERFORM A MARRIAGE CEREMONY WITHIN THE STATE OF FLORIDA AND TO SOLENNIZE THE MARRIAGE OF THE ABOVE NAMED PERSONS. THIS LICENSE MUST BE USED ON OR AFTER THE EFFECTIVE DATE AND ON OR BEFORE THE EXPIRATION DATE IN THE STATE OF FLORIDA IN ORDER TO BE RECORDED AND VALID.</p>			
17. COUNTY ISSUING LICENSE BROWARD	18. DATE LICENSE ISSUED OCT 24, 2003	19. DATE LICENSE EFFECTIVE OCT 24, 2003	20. EXPIRATION DATE DEC 22, 2003
21. SIGNATURE OF COURT CLERK OR JUDGE <i>Diane Botta</i>		22. TITLE DEPUTY CLERK DIANE BOTTA	
<p>CERTIFICATE OF MARRIAGE</p> <p>I HEREBY CERTIFY THAT THE ABOVE NAMED GROOM AND BRIDE WERE JOINED BY ME IN MARRIAGE IN ACCORDANCE WITH THE LAWS OF THE STATE OF FLORIDA.</p>			
23. DATE OF MARRIAGE (Month, Day, Year) Nov 21, 2003		24. CITY, TOWN, OR LOCATION OF MARRIAGE 141 S. County Road, Palm Beach, FL 33480	
25. SIGNATURE OF PERSON PERFORMING CEREMONY (Sign in black ink) <i>Ralph R. Warren, Jr.</i>		26. ADDRESS (Of person performing ceremony) 165 Barton Avenue, Palm Beach, FL 33480	
27. NAME AND TITLE OF PERSON PERFORMING CEREMONY The Rev. Ralph R. Warren, Jr., D.D. Rector, Church of Bethesda-by-the-Sea		28. SIGNATURE OF WITNESS TO CEREMONY (Sign in black ink) <i>Carol Lee Saluzzo</i>	
		29. SIGNATURE OF WITNESS TO CEREMONY (Sign in black ink) <i>Sam R. Th...</i>	



SEAL

Name change Cindy Herd