## **FILED** FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 May 21 1998 8:00am PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham \* Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 P97000084261 (1) DOCUMENT # KLEEN FUEL CORPORATION OF AMERICA Principal Place of Business Mailing Address \$151 NORTH A1A. #506 5151 NORTH A1A. #506 VERO BEACH FL 32963 VERO BEACH FL 32963 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/29/1997 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 Not Applicable Suite, Apt #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Regulred 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Žip Country Country This corporation owes or has paid the current year Intangible 25 Personal Property Tax due June 30. 24 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name MARTORANA, JOSEPH 5151 NORTH A1A, #506 Street Address (P.O. Box Number is Not Acceptable) 82 VERO BEACH FL 32963 83 84 City 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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS CR2E034 (10/97 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE 1.1 TITLE Change Addition TITLE NAME 1.2 NAME STREET ADDRESS 1.3 STRUET ADDRESS CITY-ST-ZIP 1.4 CHY-ST-ZIE Addition TITLE 2.1 TITLE Change NAME 2.2 NAME STREET ADDRESS 2.3 STHEFT ADDRESS CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZiP DELETE Change Addition TITLE 4.1 TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS

14. Thereby 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 generic 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 opporation or the receiver or fusice empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 12

64 CITY-ST-ZIP

54 CHTY-ST-ZIP

6.1 TILE

6.2 NAME 6.3 STREET ADDRESS

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CITY - ST - ZIP

STREET ADDRESS CITY-ST-ZIP

TITLE

NAME

Jeh Mailorana

DELETE

4/21/90

Change

Addition