

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.  
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

0001009

<b>PROFIT CORPORATION ANNUAL REPORT 1999</b>		FLORIDA DEPARTMENT OF STATE <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P98000025872**  
1. Corporation Name

**PERFECT CLEAN OF FERNANDINA, INC.**

Principal Place of Business  
**2128 SPRING BROOK ROAD  
FERNANDINA BEACH FL 32034**

Mailing Address  
**2128 SPRING BROOK ROAD  
FERNANDINA BEACH FL 32034**

**FILED**

99 JUL 26 AM 1:58

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified <b>03/18/1998</b>	
21		26		4. FEI Number <b>59-3513476</b>	Applied For <input type="checkbox"/> Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
22		27		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
City & State		City & State		8. This corporation owes the current year Intangible Personal Property. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
23		28			
Zip	Country	Zip	Country		
24		29			

9. Name and Address of Current Registered Agent

**YONG, FRANK J  
1050 RIVERSIDE AVENUE  
JACKSONVILLE FL 32201**

10. Name and Address of New Registered Agent

81 Name **CINDY HEETER**  
82 Street Address (P.O. Box Number is Not Acceptable)  
**2128 SPRING BROOK ROAD**  
83  
84 City **FERNANDINA BEACH FL** 85 Zip Code **32034**

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 607.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>President</b> <input type="checkbox"/> DELETE	1.1 TITLE	<b>President</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>Cindy Heeter</b>	1.2 NAME	<b>Cindy Heeter</b>
STREET ADDRESS	<b>2128 Spring Brook Rd</b>	1.3 STREET ADDRESS	<b>2128 Spring Brook Rd</b>
CITY-ST-ZIP	<b>Fernandina Beach, FL 32034</b>	1.4 CITY-ST-ZIP	<b>Fernandina Beach, FL 32034</b>
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	<b>300002953129--1</b>
CITY-ST-ZIP		2.4 CITY-ST-ZIP	<b>-08/06/99--01087--011</b>
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<b>****158.75 ****158.75</b>
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<b>TS</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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 on an attachment with an address.

SIGNATURE

**Cindy H. Heeter, President**

**7-7-99**

CR2E034 (5/99)

**Perfect Clean of Fernandina Beach, Inc.**  
**Cindy Heeter**

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2128 Spring Brook Road ~ Fernandina Beach, FL 32034  
Phone 277-3463 ~ Fax 277-3463 ~ Home Phone 277-2179 ~ Email theeter@net-magic.net

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July 08, 1999

Annual Reports Filings  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

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Dear Sir/Madame,

154.75

Please find enclosed a check for ~~\$150.00~~ instead of \$550.00. I have never received a first notice and I think I know why.

You will see that in the name and address of current registered agent box is the name and address of my lawyer. It is very possible that the first notice went to him. Please change the name and address to the above.

Sincerely,



Cindy Heeter  
President  
Perfect Clean of Fernandina Beach, Inc.