

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION

ANNUAL REPORT

1995

DOCUMENT # **S02448**

WE CLEAN, INC.



FLORIDA DEPARTMENT OF STATE

OFFICE OF CORPORATIONS

(6)

APPROVED
FILED

09/26/1990
ORLANDO, FLORIDA

661 GOLDEN SUNSHINE CIRCLE
ORLANDO FL 32807

661 GOLDEN SUNSHINE CIRCLE
ORLANDO FL 32807

1. Date of Report	09/26/1990	2. Date of Last Report	05/01/1994
3. Filing Number	59-3050545	4. Applicant For	Not Applicable
5. Certificate of Status Demand	<input type="checkbox"/>	6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/>
7. Florida Statutes	<input type="checkbox"/>	8. Florida Statutes	<input type="checkbox"/>
9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent		

EARLEY, DIANNA L. 661 GOLDEN SUNSHINE CIRCLE ORLANDO FL 32802	81 Name	
	82 Street Address (P.O. Box Number or Post Office)	
	83 City	
	84 State	FL
	85 Zip Code	

11. I, the undersigned, being duly sworn, depose and say that I am the president of the corporation named herein and that I am the person who has caused this statement to be prepared and filed in accordance with the provisions of the Florida Statutes. I am a resident of the State of Florida. My change was authorized by the corporation's board of directors. I hereby certify that the information furnished herein is true and correct to the best of my knowledge and belief.

SIGNATURE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS	
NAME	P EARLEY, DIANNA 661 GOLDEN SUNSHINE CIR. ORLANDO FL	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	V EARLEY, ROBERT E. II 661 GOLDEN SUNSHINE CIR. ORLANDO FL	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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NAME		NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I, the undersigned, certify that the information furnished with this filing is voluntarily furnished and does not qualify for the exemption statute in Section 338.02, Florida Statutes. I further certify that the information furnished on this annual report is complete, true and accurate and that my signature shall serve the same legal effect as if made under oath. I declare under penalty of perjury that the information furnished herein is true and correct to the best of my knowledge and belief.

SIGNATURE: *Dianna L. Earley*
 SIGNATURE AND PRINT OR PRINTED NAME OF SIGNING OFFICER OR OFFICER
 DIANNA L. EARLEY, PRESIDENT