

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **V38037** (0)

1. Corporation Name

CLEANER CARS, INC.



Principal Place of Business

Mailing Address

**5920 CARRIER STREET NORTH
SUITE 1
ST PETERSBURG FL 33714**

**5920 CARRIER STREET NORTH
SUITE 1
ST PETERSBURG FL 33714**

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt #, etc

26 Suite, Apt #, etc

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

29

30

3. Date Incorporated or Qualified

05/20/1992

3a. Date of Last Report

03/21/1995

4. FEI Number

59-3122785

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 190.032
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**DATILLO, JOSEPH A
5920 CARRIER STREET NO
SUITE 1
ST PETERSBURG FL 33714**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 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. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and fee applicable

(If Office Registered Agent signature required when reinstating)

(Date)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	P	☐ DELETE
NAME	DATILLO, JOSEPH A	
STREET ADDRESS	5920 CARRIER STREET N. SUITE 1	
CITY - ST - ZIP	ST. PETERSBURG FL	
TITLE	VP	☒ DELETE
NAME	DUFOR, THOMAS J.	
STREET ADDRESS	5920 CARRIER STREET N. SUITE 1	
CITY - ST - ZIP	ST. PETERSBURG FL	
TITLE	SVP	☒ DELETE
NAME	TAYLOR, MICHAEL A.	
STREET ADDRESS	5920 CARRIER STREET N. SUITE 1	
CITY - ST - ZIP	ST. PETERSBURG FL	
TITLE	S	☒ DELETE
NAME	PRIDGEON, LARRY J	
STREET ADDRESS	5920 CARRIER STREET N. SUITE 1	
CITY - ST - ZIP	ST. PETERSBURG FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

11 TITLE	T	☐ Change ☒ Addition
12 NAME	Scott A. Deeran	
13 STREET ADDRESS	5920 Carrier Street N. Suite 1	
14 CITY - ST - ZIP	St. Petersburg, FL 33714	
21 TITLE	S	☐ Change ☒ Addition
22 NAME	Jack R. Mew	
23 STREET ADDRESS	5920 Carrier Street N. Suite 1	
24 CITY - ST - ZIP	St. Petersburg, FL 33714	
31 TITLE		☐ Change ☐ Addition
32 NAME		
33 STREET ADDRESS		
34 CITY - ST - ZIP		
41 TITLE		☐ Change ☐ Addition
42 NAME		
43 STREET ADDRESS		
44 CITY - ST - ZIP		
51 TITLE		☐ Change ☐ Addition
52 NAME		
53 STREET ADDRESS		
54 CITY - ST - ZIP		
61 TITLE		☐ Change ☐ Addition
62 NAME		
63 STREET ADDRESS		
64 CITY - ST - ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Joseph A. Dattilo 6-19-96

813-588-5773

CR2E034 (3/96)