FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V56140

(9)

CLEAN CONCEPT GROUP, CORP.

FILED Feb 06 1998 8:00am Secretary of State

		, ,					
Principal Place of Business Mailing Address							
10521 SW 157TH PLACE. #201 MIAMI FL 33196		10521 SW 157TH PLACE. #201 MIAMI FL 33196		DO NOT WRITE IN THIS	S SPACE		
					3. Date Incorporated or Qualified		
					08/07/1992		
2. Principal Place of Business		<u></u> ⊢¬	2a. Mailing Address		4. FEI Number	Applied For	
21		26			65-0349623	Not Applicable	
Sulte, Apt. #, e	otc.	Suite, Apt.	#, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State	•		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 4	Country 25	Zip 29	30	ountry	This corporation owes or has paid the c Personal Properly Tax due June 30.	urrent year Intangible	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
	ILLO, YOLANDA			81 Name	Yolanda Jaramill	O	
	N/72 ND AVE #201 EL-33166	(nam ya	B (22300CA wow)		dress (P.O. Box Number is Not Acceptable)	†	
					suite 210		
·					iami F	33100	
office or regis	ne provisions of Sections 607 stered agent, or both, in the S amiliar with, and accept the c	State of Florida. Such cha	inge was authoriz	ed by the corpora	rporation submits this statement for the purpose ation's board of directors. I hereby accept the ap	of changing its registered pointment as registered	
SIGNATI IRE							

(NOTF: Registered Agent signature required when reinstating) Signature, typod or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE ___ Addition Change TITLE 1.1 TITLE NAME SILVA, CAMILO A 1.2 NAME 10521 SW 157TH PLACE #201 STREET ADDRESS 1.3 STREET ADDRESS MIAM! FL 33196 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Addition 2.1 TITLE TITLE ST SILVA, BEATRIZ E NAME 22 NAME 10521 SW 157TH PLACE #201 STREET ADDRESS 23 STREET ADDRESS **MIAMI FL 33196** 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS City-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change 5.1 TITLE Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CiTY-ST-ZiP DELETE Change Addition 6.1 TITLE TITLE NAME 6.2 NAME STREET ADDRESS **63 STREET ADDRESS**

CITY-ST-ZIP 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 of 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 corpolation or the receiver or trustee emovered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changing, or on an attainment with a relation state.

1300) 3BC-64MA