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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 **DOCUMENT # L53718**

SOUTHSIDE CLEANERS, INC.

FILED Feb 19, 1999 8:00 am Secretary of State

02-19-1999 90061 045 ***150.00



Principal Place of Business Mailing Address						S NORMON AND NICES HAVE TRANSPORTED (BUT OFF	A BABA BIBN TIQU B	IIBII TITII ITBI
3807 SOUTHSIE JACKSONVILLE US		3807 SOUTHSIDE 8LVD. JACKSONVILLE FL 32216 US				DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualifed 02/26/1990		
<u> </u>	ipal Place of Business 2a. Mailing Address					4. FEI Number	<u> </u>	oplied For
21	26					59-2994476	\$8.75	ot Applicable
Suite, Apt.						5. Certificate of Status Desired	50.73 /	
City & Stat	State City & State					6. Election Campaign Financing Trust Fund Contribution	7	May Be to Fees
Zip	Country	Zip	Countr			8. This corporation owes the current year	<u> </u>	<u></u>
24	25 29 30			Personal Property Tax.				
<u> </u>	9. Name and Address of Current	Registered Agent	10. Name and Address of New Register	ad Agent				
KOEGLER, STEVEN C.					Name			
217	PONTE VEDRA PARK DR	•	}8	B2	Street Addres	ss (P.O. Box Number is Not Acceptable)		}
PON	TE VEDRA BEACH FL 32082		Ī	В3]
			1	34	City		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 title if applicable (NOTE; Re	egistered A	gent :	signature required v			
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS		
TITLE	P	☐ DELETE	1.1 TITL				Change	Addition
NAME	HARRIS, MICHAEL P.		1.2 NAM	ΙE	•			Į.
STREET ADDRESS	3807 SOUTHSIDE BLVD.		1.3 STRE		ADDRESS			- 1
CITY-ST-ZIP	JACKSONVILLE FL		1.4 CITY-		ZIP		Channa	Addition
TITLE	VST	☐ DELETE	2.1 TITLE		1		Change	[] Modition
NAME	HARRIS, AMY C	,	2.2 NAME					}
STREET ADDRESS	3807 SOUTHSIDE BLVD JACKSONVILLE FL	•	2.3 STREE			••		~ ~ -
CITY-ST-ZIP TITLE	-4		3.1 TITL		-210		☐ Change	Addition
NAME			3.2 NAM				_ ,	(
STREET ADDRESS		1	1		ADDRESS			{
CITY-ST-ZIP			3,4. CIT					}
TITLE			4.1 TITL				Change	☐ Addition
NAME .			4. 2 NAA	νE				
STREET ADDRESS		ļ	4.3 STR	EET A	ADORESS			1
CITY-ST-ZIP			4.4 CITY	-ST-	ZIP			
TITLE	<u> </u>	☐ DELETE	5.1 TITL	E			☐ Change	Addition
NAME		ı	5.2 NAM	Æ	}			{
STREET ADDRESS		,	5.3 STR	EET A	ADDRESS			1
CITY-ST-ZIP			5.4 CITY		ZIP	·		
TITLE		☐ DELETE	6.1 TITL		ł		☐ Change	☐ Addition ∤
NAME		,	6.2 NAM		ł			
STREET ADDRESS		,			NOORESS			(
CITY-ST-ZIP		}	6.4 CITY	- ST-	ZIP			ł

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, open an attachment with any address, with all other like empowered.

SIGNATURE:

9049926640