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

**PROFIT CORPORATION ANNUAL REPORT** 

1002

CITY-ST-ZIP



## Sandra B. Mortham

**FILED** 

May 06 1998 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

VIZCAY	MENT # P95000 YA QUALITY CLEANERS, INC	0041361 (3)	)			
•	ce of Business	Mailing Address				
871 N. NOB HILL RD PLANTATION FL 33324 US		871 N NOB HILL RD Plantation fl 33324 US		DO NOT WRITE IN TH	S SPACE	
		<del>- •</del>			3. Date Incorporated or Qualified	
			·		05/25/1995	
	Place of Business	2a. Mailing Address			4. FEI Number	Applied For
21 Suite Ant	# etc	Suite Ant # etc			65-0674946	Not Applicable
Suite, Apt. #, etc.		Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & Stat	te	City & State			6. Election Campaign Financing	\$5.00 May Be
23		28		<u> </u>	Trust Fund Contribution	Added to Fees
Zip	Country	Zφ	Countr	у	8. This corporation owes or has paid the	
24	25	29	30		Personal Property Tax due June 30.	Yes No
A16	9. Name and Address of Current	Hegistered Agent	81	Name	10. Name and Address of New Registere	o Agent
	EGEL, RONALD L ESQ.					
1800 CORPORATE BLVD., N.W.			82	Street Add	dress (P.O. Box Number is Not Acceptable)	
SUITE 302 BOCA RATON FL 33431			83	<del> </del>		
ы	ANTOLLE MARIE			]		
			84	City	F	85 Zip Code
SIGNATURE	Signature, typed or predectinating of registered ages OFFICERS AND	nt and ten'it applicable (NO			rporation submits this statement for the purpose ation's board of directors. I hereby accept the a purpose upon the common reinstating.  ADDITIONS/CHANGES TO OFFICERS A	
TITLE	D OFFICERS AND	DELETE	1.1 TITLE	<del></del>	ADDITIONS/CHAINGES TO OFFICERS A	Change Addition
NAME	CHAMBERLAIN, THOMAS W		1.2 NAME	1		The seconds The seconds
STREET ADDRESS	1590 HARBOR SIDE DR		8	T ADDRESS		
CITY-ST-ZIP	FT LAUDERDALE FL 33328		1.5 STILE			
TITLE	D	DELETE	2.1 TITLE			Change Addition
NAME	CHAMBERLAIN, MARTHA L		2.2 NAME	[		
STREET ADDRESS	1590 HARBOR SIDE DR		2.3 STREE	T ADDRESS		
CITY-ST-ZIP	FT LAUDERDALE FL 33326		2. 4 CITY-	ST-ZIP		
TITLE	D BODDIOUEZ IIIAN A	☐ DELETE	3.1 TITLE			Change Addition
NAME	RODRIGUEZ, JUAN A		3.2 NAME	i		
STREET ADDRESS	1			T ADDRESS		
CITY-ST-ZIP	FT LAUDERDALE FL	DELETE	3.4. CITY-	ST-ZIP		Change Addition
TITLE NAME	GONZALEZ-RODRIGUEZ , NAY	•	4.1 TITLE 4. 2 NAME	.		C Originals C Monthol
STREET ADDRESS	33 GABLES BLVD.	peri t		I ADDRESS		
CITY-ST-ZIP	FT LAUDERDALE FL		4.3 STREE			
TITLE		☐ DEL <b>E</b> TE	5.1 TITLE			Change Addition
NAME	}	<u> </u>	5.2 NAME			· <del>-</del>
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP	<u> </u>		5.4 CITY -			
TITLE		DELETE	6.1 TITLE			☐ Change ☐ Addition
NAME			6.2 NAME			
	<b>j</b>					

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 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 combination or the receives or mustice of prowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter 607 and attachment with an address.