# **2006 FOR PROFIT CORPORATION**

#### Jul 20, 2006 8:00 am Secrétary of State **ANNUAL REPORT** 07-20-2006 90001 044 \*\*\*550.00 **DOCUMENT # 183585** 1. Entity Name SWIFT CLEANERS, INC. 40100207 Principal Place of Business Mailing Address 4114 HERSCHEL ST #111 4114 HERSCHEL ST #111 JACKSONVILLE, FL 32210 JACKSONVILLE, FL 32210 2. Principal Place of Business 3. Mailing Address 1839 Woodmere Drive Suite, Apt. #, etc. Suite, Apt. #, etc. 07112006 Chg-P CR2E034 (11/05) Applied For City & State City & State 4. FEI Number Jacksonville, PL 59-0747225 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired WS Fce Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SAFER, ELIOT J Street Address (P.O. Box Number is Not Acceptable) 10110 SAN JOSE BLVD JACKSONVILLE, FL 32257 City Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing **\$5.00** May Be Trust Fund Contribution. Added to Fees Due by September 6, 2006 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. PTDS ☐ Delete Addition TITLE TITLE ☐ Change NAME JOHNSTON,J G NAME STREET ADDRESS 4114 HERSCHEL ST, #111 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP JACKSONVILLE, FL 32210 TITHE Detete TITI F ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Addition ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TILLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition TITI F NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS

**FILED** 

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

7-13-06 Daytime Phone # SIGNATURE:

CITY-ST-7IP

Eve E. Brown, CPA
Daniel M. Edelman, CPA, CVA
Matthew E. Edelman, CPA
John W. Giehrl, CPA
William R. Lahnen, Jr., CPA
Neil N. Presser, CPA
John W. Ranes, Jr., CPA
Edward J. Salek, CPA, CVA
James L. Smith, Jr., CPA, PFS

## ATTACHMENT

<u>40100207</u> <u>#183585</u>

## Presser, Lahnen & Edelman

Certified Public Accountants

Jacksonville • Fernandina Beach

### MEMORANDUM

TO:

Jeanne

Swift Cleaners 1839 Woodmere Dr Jacksonville, FL 32210

FROM:

Shellie

SUBJECT:

2006 Annual Report

DATE: 07/11/06

Jeanne,

Please find the enclosed Annual Report. I have made the necessary address changes. Jamie Johnston or his daughter (P.O.A.) will need to sign the bottom. Then make a copy of the signed form, to retain for your records, and mail the original with a check, for \$550.00, to the address stated on the instructions form. Please be sure to write the Document number on the check. If you have any questions or concerns, please call me.

Thank you, Shellie