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

**PROFIT CORPORATION ANNUAL REPORT** 

1997



## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 405812

(9)

CRAFT CLEANERS AND LAUNDRY, INC.

**FILED** May 06 1997 8:00am Secretary of State

Principal Plac	e of Business	Mailing Address	Mailing Address				4 109/31 019/4 00/01 01/04 40/04 1/04/0 1/04/0 0/04/1 0/04/1 0/04/4 0/04/4 0/04/1 (0/04/				
12711 BISCAYNE BLVD. MIAMI FL 33181		12711 BISCAYNE BLVD. MIAMI FL 33181-2003									
							Date Incorporated or Qualified 07/27/1972		te of Last <b>25/199</b> 6		
2. Principal P	Place of Business	2a. Mailing Address	2a. Mailing Address 26			4.	4. F£I Number 59-1576812			Applied For Not Applicable	
Sulte, Apt.	₩, etc.	Suite, Apt. #, etc.			5.	Certificate of Status Desired			Additional Required		
City & Stat	te	City & State				6.	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zip	Country	Country Zip		Country		8.	This corporation has liability for		tax under		
24	25	[29]	30	_		1		Yes [			
	9. Name and Address of Curre	ent Registered Agent	<del></del>	81			Name and Address of New Re	gistered	Agent		
<b>S</b> CHOLTENS, JOHN G					Name	)					
	'11 BISCAYNE BLVD. VMI FL 33181				Stroct	Address (P	ddress (P.O. Box Number is Not Acceptable)				
*****	um ( 2 00 10 1			83				,			
				84	City			FL	85 Zij	Code	
11. Pursuant office or agent. I a	to the provisions of Sections 607.00 registered agent, or both, in the Stat am familiar with, and accept the obli	532 and 607.1508, Florida State of Florida Such change w gations of, Section 607.0505	alutes, the a as authorize Florida Sta	ibove ed by itutes	e-named the corps	d corporation rporation's b	n submits this statement for the loard of directors. I hereby acce	ourpose of pt the app	changing ointment a	its registered is registered	
SIGNATURE	Signature, typed or printed name of registered a	gent and tile if applicable (	NOTE Registeri	en Ago	int signature	re required when	reinstating)	DATE			
12.	OFFICERS A	ND DIRECTORS	18.			,	ADDITIONS/CHANGES TO OFFIC	CERS AND	DIRECTO	PRS IN 12	
TITLE	PD	DELETE :		1.1 TOLE		T			☐ Change	Addition	
NAME	SCHOLTENS, JOHN G, II		1.8 N	IAM <del>L</del>							
STREET ADDRESS	12711 BISCAYNE BLVD	1.3		1.3 STREET ADDRESS							
CITY-ST-ZIP	MIAMI, FL 00000										
TITLE	\$1			21 TITLE		<b>+</b>			Change	Addition	
NAME	SCHOLTENS, JOHN G		2.2 h	_					/		
STREET ADDRESS	12711 BISCAYNE BLVD.				ADDRESS						
CITY-ST-ZIP	MIAMI FL				ST - <b>Z</b> IP						
TITLE		DELETE	3.11	******		SEC			☐ Change	: X Addition	
NAME			3.2 1	IAME		1560	Joy Dupuis			<b>,</b>	
STREET ADDRESS			1		ADDRESS		715 W. 50th St.				
CITY-ST-ZIP					S1-7IP		Hialeah, FL 33012				
TITLE		DEFETE	4.1.1			1	·		Change	Addition	
NAME			4.2	NAME					_		
STREET ADDRESS					ADDRESS						
CITY-ST-ZIP					ST-71P						
TITLE		DELETÉ	5.11				mana kaki a akanden ada a kara kiladan ilmada a isti kara Mana ami eti. Visud kidi da kilada kilada Marek Marek		☐ Change	Addition	
NAME			5.21	IAME							
STREET ADDRESS					ADDRESS						
CITY-ST-ZIP					ST-ZIP	ŀ					
TITLE		DELETE	6.1 1	***		***********			Change	Addition	
NAME				IAME							
STREET ADDRESS					ADDRESS						
CITY-ST-ZIP	}				31 - 21P						
VIII-SI-EIF	<del> </del>		0.4 (	411.5	27.40	1	140.071011 51 11 0				

Too 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, over an attachment with an address.

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