PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # 452194

"SWIFT" CLEANERS AND LAUNDRY, INC

						##	AND HUITE	
Principal Place of Business Mailing Address					1 INCHIL BIRMI MILIM LIBOR CIBID ICHIL	Albi Bibit dibit dibit dibit bibit	#1#11 #1#11 1##)	
1526 SOUTH FEDERAL HWY DELRAY BEACH FL 33483 1526 SOUTH FEDERAL HW DELRAY BEACH FL 33483			(DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualifed			
					07/08/1974			
Principal Place of Business 2a. Mailing Address				4. FEI Number	├	pplied For		
21		26			59-1534976		ot Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	27		5. Certificate of Status Desired	Fee R	Fee Required	
City & State		City & State	28		Election Campaign Financing Trust Fund Contribution		May Be to Fees	
Zip	Country	Zip	Country	1	8. This corporation owes the current			
24	25	29 3	0		Personal Property Tax.	X Yes	□No	
	9. Name and Address of Cur	rent Registered Agent			10. Name and Address of New Re	gistered Agent		
			81	Name				
ROSCIGNO, V. JAMES 1526 S FEDERAL HWY			82	Street Add	Iress (P.O. Box Number is Not Acceptable	e)		
	RAY BEACH FL 33483		83		· · · · · · · · · · · · · · · · · · ·			
			84	City		FL 85 Zip	Code	
office or re	egistered agent, or both, in the Sta	0502 and 607.1508, Florida Statutes ate of Florida. Such change was aut ligations of, Section 607.0505, Floric	norized by	the corporati	poration submits this statement for the pi ion's board of directors. I hereby accept	umose of changing it	s registered egistered	
SIGNATURE					and unforce assignmentational	DATE	í	
	Signature, typed or printed name of registered	-3	13.	nt signature requir	ed when reinstating) ADDITIONS/CHANGES TO OFFI		ORS IN 12	
TITLE		AND DIRECTORS	1.1 TITLE		ADDITIONS/CHANGES TO OTT	☐ Change		
	POCOSONO NA VANEO		1.2 NAME				_	
NAME	ROSCIGNO, V JAMES	h mara v		TADDRESS			ļ	
STREET ADDRESS	1526 SOUTH FEDERAL HIG	HWAY					į	
CITY-ST-ZIP	DELRAY BEACH FL 33483	□ DELETE	1.4 CITY-5 2.1 TITLE	51-ZIP		Change	Addition	
TITLE	VPS	C) DELETE	•					
NAME	ROSCIGNO, MARGARET		2.2 NAME				ĺ	
STREET ADDRESS	1526 SOUTH FEDERAL HIG	HWAY	l	TADDRESS			į	
CITY-ST-ZIP	DELRAY BEACH FL 33483	☐ DELETE	2, 4 CITY-	ST-ZIP		Change	Addition	
TITLE	D	□ DECE IE	3.1 TITLE					
NAME	FREDERICK, CAROLYN		3.2 NAME					
STREET ADDRESS	1526 SOUTH FEDERAL HIG	HWAY		T ADDRESS				
CITY-ST-ZIP	DELRAY BEACH FL 33483		34 CITY-	ST-ZIP		☐ Change	Addition	
TITLE		☐ DELETE	4.1 TITLE				- Laddidon	
NAME			4. 2 NAME					
STREET ADDRESS			1	T ADDRESS				
CITY-ST-ZIP		C) per ere	4.4 CITY-1	ST-ZIP		☐ Change	☐ Addition	
TITLE		☐ DELETE	5.1 TITLE			□ Change		
NAME			5.2 NAME					
STREET ADDRESS				TADDRESS	•	•		
CITY-ST-ZIP			5.4 CITY-1	ST-ZIP			☐ Addition—	
TITLE		☐ DELETE	61 TITLE			Change	Addition	
NAME			6.2 NAME					
OTDEET ADDRESS			6.3 STREE	T ADDRESS I				

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, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

STREET ADDRESS

Mar 04, 1999 8:00 am Secretary of State

03-04-1999 90207 029 ***150.00