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PROFIT CORPORATION annual report

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

May 07 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **596348**

(3)

NORWOOD CLEANERS, INC. Principal Place of Business Mailing Address 724-728 N.W. 183RD ST. 724-728 N.W. 183RD ST. MIAMI FL 33169-4250 MIAMI FL 33169-4250 3a. Date of Last Report 3. Date Incorporated or Qualified 12/05/1978 05/01/1996 Applied For 2a. Mailing Address 4, FEI Number 2. Principal Place of Business 59-1865983 Not Applicable 26 Suite, Apt #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 28 Trust Fund Contribution Added to Fees 23 Country This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No Country Zip 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name WILLIAMS, ROLLIN 724-728 N.W. 183RD ST. 82 Street Address (P.O. Box Number is Not Acceptable) MIAMI, FL LP FL 83 City 84 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typical or profine transe of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 96/6) 12. 13. DELETE Change Addition 1.1 TITLE 1001 WILLIAMS, ROLLIN CR2E034 NAME 1.2 NAME 724 728 N.W. 183RD ST. 1.3 STREET ADDRESS STREET ADDRESS MIAMI FL CITY-ST-ZIF 1.4 CITY - ST - ZIP DELETE Change Addition 21 TITLE THUE WILLIAMS, NANCY 2.2 NAME NAME 724 728 N.W. 183RD ST. STREET ADORESS 2.3 STREET ADDRESS MIAMI FL 2. 4 CITY - ST- ZIP CITY-ST-ZII Change DELETE 3.1 TITLE Addition THEF MASSARO, GREGORY 3.2 NAME NAME 1721 SW 119 TERR. 3.3 STREET ADDRESS STREET ADDRESS DAVIE FL 34. CITY-\$1-ZIP CITY-ST ZIP DELETE Change Addition THILE 4.1 TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP ☐ Addition DELETE 5.1 TITLE THE 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY - ST - ZIF DELETE Change Addition 6.1 TITLE THE 6.2 NAME NAME **6.3 STREET ADDRESS** STREET ADDRESS 64 CITY-ST-ZIP CITY-ST-ZiP

14. I do 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.