

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G16097

FILED
Jan 06, 2005
Secretary of State

Entity Name: CLEANERS OF CORAL GABLES, INC.

Current Principal Place of Business:

2619 PONCE DE LEON BLVD
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

2619 PONCE DE LEON BLVD
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: 59-2238588

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SUAREZ, ANGEL
2619 PONCE DE LEON BLVD
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

SUAREZ, ANGEL
2619 PONCE DE LEON BLVD
CORAL GABLES, FL 33134 US

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.

SIGNATURE: ANGEL SUAREZ

01/06/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: SUAREZ, ANGEL
Address: 8855 SW 111 TERR.
City-St-Zip: MIAMI, FL 33176

Title: STD () Delete
Name: SUAREZ, ANGEL,
Address: 8855 SW 111 TERR
City-St-Zip: MIAMI, FL 33176

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANGEL SUAREZ

O/D

01/06/2005

Electronic Signature of Signing Officer or Director

Date