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PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **H53678** **(9)**

1. Corporation Name

JACKSONVILLE DRY CLEANING, INC.

Principal Place of Business	Mailing Address
8711 PERIMETER PARK BLVD STE 6 JACKSONVILLE FL 32216 US	~~8711 PEIMETER PARK BLVD~~ STE 6 JACKSONVILLE FL 32216 US

3. Date Incorporated or Qualified: 04/24/1985	3a. Date of Last Report: 01/18/1995
4. FEI Number: 59-2633521	☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No	

2. Principal Place of Business	2a. Mailing Address
21	26 8711 Perimeter Park Blvd.
22 Suite, Apt. #, etc.	27 Suite 6
23 City & State	28 City & State
24 Zip / 25 Country	29 Zip / 30 Country

9. Name and Address of Current Registered Agent

MCQUAIG, DAVID H.
8711 PERIMETER PARK BLVD.
SUITE 6
JACKSONVILLE FL 32216

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City **FL** 85 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. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	PVT SHRETTA, MUKESH ~~1209 RIVERGREEN DR~~ ~~ATLANTA GA~~ ☐ DELETE	1 TITLE / 2 NAME / 3 STREET ADDRESS / 4 CITY ST ZIP	☒ Change ☐ Addition 3780 Quick View Drive Marietta, GA 30062
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	SD SHRETTA, MUKESH ~~1209 RIVERGREEN DR~~ ~~ATLANTA GA~~ ☐ DELETE	2 TITLE / 2 NAME / 2 STREET ADDRESS / 2 CITY ST ZIP	☒ Change ☐ Addition 3780 Quick View Drive Marietta, GA 30062
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	S SHRETTA, SHEELA 9645 BAYMEADOWS RD, 783 JACKSONVILLE FL ☐ DELETE	3 TITLE / 3 NAME / 3 STREET ADDRESS / 3 CITY ST ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	☐ DELETE	4 TITLE / 4 NAME / 4 STREET ADDRESS / 4 CITY ST ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	☐ DELETE	5 TITLE / 5 NAME / 5 STREET ADDRESS / 5 CITY ST ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	☐ DELETE	6 TITLE / 6 NAME / 6 STREET ADDRESS / 6 CITY ST ZIP	☐ Change ☐ Addition

14. I/we hereby certify that the information supplied with this filing is voluntarily furnished and 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.

SIGNATURE: S. Shretta Sheela Shretta 1/22/96 (904)737-2728
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone Number

CR2E034 (12/95)