FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT #

(2)

CAR(DUSEL CLEANERS, INC.		`,			 		
Principal Place	of Business	Mailing Addre	ess		I IBBIDIII EKE IBKK BÜKK ÜNKI	Maria de Cara		
3030 E. HIGHWAY 436 SUITE 112 APOKA FL 32703		3030 E. HIGHWAY 436 SUITE 112 APOPKA FL 32703						
US		US			 Date Incorporated or Qualified 05/24/1989 		of Last R 05/01/1	
2. Principal Pl.	ace of Business	2a. Mailing Ad	Idress		4. FEI Number			Applied For
Suite, Apt.	# etc	26	u		59-2953716			Not Applicable
22	π, Cic.	Suite, Apt	. #, etc		5. Certificate of Status Desired			5 Additional
City & State)	City & Sta			£ Electron Comparing file			Required
23		28			Election Campaign Financing Trust Fund Contribution			O May Be of to Fees
Zip	Country	Zip	Country		8. This corporation has liability for	r intangible ta		
24	25	29	30		Florida Statutes 🛛 🛣 Ye	s 🔲 No		105.002.
	9. Name and Address of Curre	nt Registered Ager			10. Name and Address of New	Registered /	4gent	
BERNE, KENNETH C. 3030 E. HIGHWAY 436 SUITE 112 APOPKA FL 32703				Street Addres	GORY E. BINI SP.O. Box Number is Not Accepta E. Hwy 436	SER ble)		
APOPKA FL 32/03				A POI	000	FL	85 Zip	p Code スプルろ
familiar wit	o the provisions of Sections 607,050; ed agent, or both, in the State of Fiori b, and accept the obligations of Sect May Put U Du du Signature (option pathetical politicate adaption	tion 607.0505, Florid	ida Statutes, the above han is authorized by the corporal a Statutes. DETH BINDER thick Psychological Agents of	non s board (on submits this statement for the puof directors. Thereby accept the app PRE IDENT			
12.	OFFICERS AN	D DIRECTORS	13.		ADDITIONS/CHANGES TO OF	EICERS AND	DIBECTO	BS IN 12
TITLE	P	⊠Di	ELETE 1:1 TITLE	<u>P</u>			/ -	Addition
NAME	BERNE, KENNETH C.		1.2 NAME	BIN	DER, GREGORY EDE. HWY 436,50	.τε 113	,	_
STREET ADDRESS	3030 E. HIGHWAY 436, SU APOPKA FL	HIE 112	13 STREET ADD	RESS 3000	SE, HOUY TOU, SE	110 110		
CITY+ST-ZIP TITLE	VP		1.4 CITY - \$T - ZI	P APU	PKA, FL 3+703			
NAME I	BINDER, MARY BETH	D6		i] Change	☐ Addition
STREET ADDRESS	3030 E. HIGHWAY 436, SU	IITE 112	2 2 NAME					•
CITY-ST-ZIP	APOPKA FL	112	2.3 STREET ADD					
TITLE		D	LETE 24 CITY ST-ZI				1 0	
NAME			3.2 NAME			L.) Change	Addition
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CITY-ST-ZIP			3.4 C-TY - ST - ZI	i				i
TITLE		J. []					Change	Addition
NAME			4.2 NAME	İ		L	Londings	[
STREET ADDRESS			4.3 SIREET ADD	RESS				}
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TIFLE		□ D€				Г	Change	Addition
NAME			5.2 NAME				a-	
STREET ADDRESS			5.3 STREET 4DD	RESS				
CITY - ST - ZIP			5 4 CITY - ST - ZIF					
TITLE		□ D€	LETE 6 1 TITLE				Change	Addition
NAME			6.2 NAME					
STREET ADDRESS			6.3 STREET ADD	RESS				
C(TY-S1-2)P			0.40(7): 01.30	.				

14. I do 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)(k), 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 coats; 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 spears in Block 12 or Block 13 if changed or on an attachment with an address.

SIGNATURE:

SIGNATURE:

MACHINE STATE OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Digitale Phone 4