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PROFIT **CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

L70011 **DOCUMENT #**

(6)

MICHELLE CLEANERS, INC.

Principal Place of Business Mailing Address Mailing Address Mailing Address ALT Shakeer ALT 11212 PINES BLVD PEMBROKE PINES FL 33025 PEMBROKE PINES FL 33025					3. Date Incorporated or Qualified 04/30/1990	3a. Date of Last 03/10/	Report
. Principal Plac	ce of Business	2a. Mailing Address			4. FEI Number		Applied For
i]		26		65-0223149	00	Not Applicable	
Suite, Apt. #	, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	1 1 7 -	75 Additional e Required
<u> </u>		City P. State	_ 		6. Election Campaign Financing	\$5.	00 May Be
City & State		City & State			Trust Fund Contribution	1 1	ded to Fees
]	Country	Zip	Coun	try	8. This corporation has liability for in	intangible tax under	s 199.032,
- <i>Z</i> ip }	25	29	30	•	Florida Statutes	□No	
L —	9. Name and Address of Curre				10. Name and Address of New R	egistered Agent	
			1	81 Name			
ALL MI	CHELLE		82 Street Ad		Address (P.O. Box Number is Not Acceptable)		
	PINES BLVD	8					
PEMBR	ROKE PINES FL 33025			83			
			r	84 City		FL 85	Zip Code
					oration submits this statement for the pure		to engistered offic
PRICENTALISE						DATE	
SIGNATURE _	Signature typed or printed name of registered age OFFICERS At	ND DIRECTORS	13.	Agent signature require	ed when reinstating) ADDITIONS/CHANGES TO OFF		
2.	OFFICERS AF		13. 1.1 Ti	ITE	ed when reinstaling) ADDITIONS/CHANGES TO OFF		
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I do hereby certify that the information supplied with this filling is voluntarily furnished and does not qualify for the exemption stated in Section 119.01(3)(8), Florida Statutes. From the 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 unde 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: Halma Me Lelle Alo HA

HALIMA-MICHELLE-ALI3/27