FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M90941

(9)

CELEBRITY CLEANERS, INC.

FILED
May 07 1998 8:00am
Secretary of State



						NIAH: NINII NIZII KIRIF AJAH IBCI
Principal Plac	e of Business	Mailing Address			4 reariett (se serie teire gibb) (ser gibb)	miait diali diati diati diati (80)
% ANNE JAMES % ANNE JAMES						
1002 N. MAIN ST. GAINESVILLE FL 32801		1002 N. MAIN ST. Gainesville fl 32601			DO NOT WRITE IN THIS SPACE	
OMMEGVICE	, rt. 98001	CHINESTILLE FL 32001			3. Date Incorporated or Qualified	
					07/26/1988	
2. Principal P	Place of Business	2a, Mailing Address			4. FEI Number	Applied For
21		[26]		59-2903999	Not Applicable	
Suite, Apt.	#, etc	Suite, Apt. #, etc			5. Certificate of Status Desired	\$8.75 Additional
22		27			C. Commedic of Status Desired	Fee Required
		City & State	y & State		6. Election Campaign Financing \$5.00 May Be	\$5.00 May Be
23 Zip	Country	28	I Cours		Trust Fund Contribution	Added to Fees
 -		Z(ρ Country		8. This corporation owes or has paid the	current year Intangible Yes No	
24	9. Name and Address of Ci	29 urrent Registered Agent	1301		Personal Property Tax due June 30. 10. Name and Address of New Register	
IA.	MES, ANNE	· · · · · · · · · · · · · · · · · · ·	8	1 Name	10, Hallo and Hadioas of the Hogister	ou Agont
	02 N. MAIN ST.		L			
GAINESVILLE FL 32601			8	2 Street Add	dress (P.O. Box Number is Not Acceptable)	
. •	mindiffication		8	3		
			L			
			6	4 City		85 Zip Code
SIGNATURE	Signature, typed or production is of register.	estagent and their applicable (NC SIAND DIRECTORS	II Fingistered A	igent signature requ	uired when reinstating) ADDITIONS/CHANGES TO OFFICERS A	
TITLE	T P	DELETE	1.1 HILI		ADDITIONS/CHANGES TO OFFICERS A	Change Addition
NAME	DAVIS, JOSH D.		1.2 NAM	I		
STREET ADDRESS	RT 2 BOX 58			ET ADDRESS		
CITY-ST-ZIP	MICANOPY FL			-ST-ZIP		
TITLE	PV	DELETE	2 1 TITLE			Change Addition
NAME	JAMES, CARL W.		2 2 NAM	E		
STREET ADDRESS	RT 2 BOX 52		2 3 STRE	ET ADDRESS		
CITY-ST-ZIP	MICANOPY FL		2 4 CiTy	ST ZIP		
TITLE	ST	DELETE	3.1 THILE			Change Addition
MAME	JAMES, ANNE D.		3 2 NAM			
STREET ADDRESS	RT 2 BOX 52			ET ADDRESS		
CITY-ST-ZIP	MICANOPY FL	DELETE		-ST-ZIP		Change Addison
TITLE		□ Detell	4 1 1171.6	I .		Change Addition
NAME PERFET ADDRESS			4 2 NAM			
STREET ADDRESS				ET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	4 4 CITY 5 1 TITLE			Change Addition
NAME		L. Dett II	5 2 NAM			المالمان ويستونو وي
STREET ADORESS				E1 ADDRESS		
CITY-ST-ZIP			54 CITY	I .		
TITLE		DELETE	6 1 TITLE		·····	Change Addition
NAME			62 NAM			_ ,
STREET ADDRESS				ET ADDRESS		
CITY-ST-ZIP			64 CITY			

14. I hereby cortify 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 roceiver 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

Inna Dami

ANNE TAME

4-20-98

352 -3726542