

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 08, 2004 8:00 am
Secretary of State

09-08-2004 90206 003 ***150.00

DOCUMENT # P01000067580

1. Entity Name
ALBERT'S DRY CLEANING SERVICE CO.



Principal Place of Business
**19421 N.W. 39TH COURT
MIAMI, FL 33055**

Mailing Address
**19421 N.W. 39TH COURT
MIAMI, FL 33055**

24083998



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

08192004

Chg-P

CR2E034 (10/03)

City & State

City & State

4. FEI Number

65-1123515

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GOMEZ, JERRY P JENNY
19421 N.W. 39 COURT
MIAMI, FL 33055

Name

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

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00
Due by September 8, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**PSD
GOMEZ, JENNY
19421 N.W. 39TH COURT
MIAMI, FL 33055** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**TD
GOMEZ, ALBERTO
19421 N.W. 39TH COURT
MIAMI, FL 33055** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

TITLE
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STREET ADDRESS
CITY - ST - ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

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12. I hereby certify 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

8/28/04

ATTACHMENT

24083998

Miami, Fl., Aug 28, 2004

Fla Dtp State
Div of Corp
P.o. Box 1500
Tallahassee, Fl 32302

Re: Doc # P01000067580

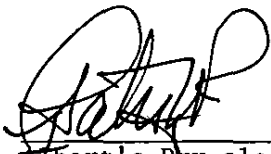
ALBERT'S DRY CLEANING CO

Sirs:

Just a few lines to let you know, that the form to pay
the Annual Report, never was received until present,

Please, in this circumstances we want ask you for waiver to
the charges for late filing.

Thank you in advance, we remain very truly yours



Albert's Dry cleaning Co
19421 NW 39 Cts
Miami, Fl 33055