2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jun 03, 2005 8:00 am Secretary of State

DOCUMENT # P04000156236 1. Entity Name KING CLEANERS BIZ, CORP.							05-05-2005	90085	008 ***1	50.00
Principal Place of Business Mailing Address						_{				
1982 W. 60TH ST.			1982 W. 60TH ST.				660213	28		,
HIALEAH, FL 33012			HIALEAH, FL 33012			00023000				
						1 (1222) (1	CON CHAN CAR FOR THE			
2. Principal Place of Business			3. Mailing Address							
Suite, Apt. #. etc.			Suite, Apt. #, etc.			05022005	Chg-P	CR2E	034 (10/03)	
City & State			City & State			4. FEI Numbi	20.196514	LR		plied For t Applicable
Zip Country			Zip Country			1	of Status Desired	0	\$8.75 Add	itional
5. Name and Address of Current			Indictored Agent			7. Name and Address of New Registered Agent				
	9. Name	and vodiess of Chuair	registered Agent	Name	/. Name and	Address of New A	egistored	Agent		
GARCIA, IRIS N 1982 W. 60TH ST. HIALEAH, FL 33012					Street Address (P.O. Box Number is Not Acceptable)					
MINLEAR, FL 33012										
	•			City				FL	Zip Cod	В
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 pristed name of registered agent and total applicable. (NOTE: Registered Agent signature required when remalating) DATE										
FILE NOWILL FEE IS \$150.00 Due by September 7, 2005 9. Election Campaign Finar Trust Fund Contribution.						5.00 May Be dded to Fees	In accordance v corporation did	vith s. 601 not receiv	7.193(2)(b), ve the prior i	F.S., the notice.
10.		OFFICERS AND	DIRECTORS	11.		ADDITIONS	CHANGES TO OFF	CERS AND	DIRECTOR	S IN 11
IMLE	D		☐ Deleta	πţ					☐ Change	Addition
HAME STREET ADORESS	GARCIA, 1982 W.		NAME STREET		IE Tet address		•			
CITY-ST-ZIP	1	I, FL 33012			- 51 - ZIP					
TITLE	<u> </u>		☐ Delete	TITL	£	-			☐ Change	Addition
HAME	ŀ			NAM	-					
STREET ADDRESS CITY-ST-ZIP					EET AODRESS 1-S1-ZIP					
TITLE	 		☐ Delete	TITL					☐ Cr.#190	Addition
NAME	!			NAM						
STREET ADDRESS	}				EET ADDRESS					
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CITY-ST-ZIP				CITY	r-ST-2/P					
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TITLE	 		☐ Delete	TITL	.E	·			Change	Addition
NAME				NA.	1					
STREET ADDRESS CITY-ST-ZIP					EET ADDRESS Y-ST-20P					
	certify that t	ne intormatico a contact with	this filing does not qualify to			Section 110 07/21	(i) Florida Standes	Liuriper ce	ortily that the i	ntormation
indicated	d on this rep	ort or supplemental report in the receiver or trustee amo	true and accurate and that owered to execute this repor	my signs the mou	ature shall have the	he same legal elle 607. Florida Statut	ct as if made under es: and that my nam	oath; that I e appears	am an officer	or director
changed	l, or on an al	tachme flywith an address.	with all other like empowered	1 .		_			5.555	
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