

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000154607

**FILED**  
**Apr 08, 2006**  
**Secretary of State**

**Entity Name:** LAKESIDE DRY CLEANERS INC.

**Current Principal Place of Business:**

5829 ATLANTIC AVE  
DELRAY BEACH, FL 33484 US

**New Principal Place of Business:**

**Current Mailing Address:**

5829 ATLANTIC AVE  
DELRAY BEACH, FL 33484 US

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

FUNDILLER, MICHAEL J  
5829 ATLANTIC AVE  
DELRAY BEACH, FL 33484 US

**Name and Address of New Registered Agent:**

CHIARELLA, MELISSA J  
5829 ATLANTIC AVE  
DELRAY BEACH, FL 33484 US

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.

SIGNATURE: MELISSA CHIARELLA

04/08/2006

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: FUNDILLER, MICHAEL J  
Address: 5829 ATLANTIC AVE  
City-St-Zip: DELRAY NEACH, FL 33484

Title: VP (X) Delete  
Name: CHIARELLA, MELISSA  
Address: 5829 ATLANTIC AVE  
City-St-Zip: DELRAY BEACH, FL 33484

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: CHIARELLA, MELISSA  
Address: 5829 ATLANTIC AVE  
City-St-Zip: DELRAY NEACH, FL 33484

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MELISSA CHIARELLA

P

04/08/2006

Electronic Signature of Signing Officer or Director

Date