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

PROFIT **CORPORATION** ANNUAL REPORT

1998

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #1. Corporation Name P93000008927 (4)

COUNTRY DRY CLEANERS & TAILORING, INC.					7	
Principal Place of Business Mailing Address					, semen an salas titte gain bein dant datt gatel ettil ittil ittil ibet ibet ibet	
2499 - 10TH AVE NO. 2499 - 10TH AVE NO. LAKE WORTH FL 33461						DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified
						02/04/1993
-	lace of Business	2a. Mailing Address				4. FEI Number Applied For
21		[26]				65-0387221 Not Applicable
Suite, Apt.		Suito, Apt. #, etc.				5. Certificate of Status Desired S8.75 Additional Fee Required
City & State		City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip	Country	Zip	├ ──¬	Country		8. This corporation owes or has paid the current year Intangible
24	25	29	30			Personal Property Tax due June 30. X Yes No
	9, Name and Address of Curre	int Registered Agent		81	Name	10. Name and Address of New Registered Agent
ELAHI, REHMAT				61	Name	3
2499 10TH AVE. NO.			82	Street	t Address (P.O. Box Number is Not Acceptable)	
LAKE WORTH FL 33461			83			
				84	City	FL 85 Zip Code
11. Pursuant office or ragerit La	to the provisions of Sections 607 05 registered agent, or both, in the Stat im familiar with, and accept the obli	02 and 607.1508, Florida Sta e of / lorida Such change w gations of, Section 607.0505	atules, th as autho , Florida	ne above orized by Statutes	e-named the corp s.	d corporation submits this statement for the purpose of changing its registered or
SIGNATURE						
12.	Signature, typod or printed name of registered a	pent and title if applicable (ND DIRECTORS		islared Age	int signature	re required when reinstaling) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	DELETE		1.1 TOLE		Change Addition
NAME	ELAHI, REHMAT	"		1.2 NAME		
STREET ADDRESS	2499 - 10TH AVE NO.		1.3 STREE		ADDRESS	
CITY-ST-ZIP	LAKE WORTH FL 33461			1.4 CITY-S	T-ZIP	
TITLE			2.1 TIBLE		Change Addition	
NAME			- 1	2.2 NAME		
STREET ADDRESS			2.3 STR		ADDRESS	
CITY-ST-ZIP			2. 4 CITY-5	31 - ZIP		
TITLE	DELETE 3.		3.1 TITLE		☐ Change ☐ Addition	
NAME				3.2 NAME		
STREET ADDRESS			•	3.3 STREET	ADORESS	
CITY-S1-ZIP		Beiere	3 4. CHY-ST-ZIP		ST-ZIP	
TITLE		☐ DELETE		4.1 TITLE		Change Addition
I NAME			1	4. 2 NAME		1

14. 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 annual report of 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 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 it on an attachment with an address

4 3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADORESS

5.4 CITY-ST-ZiP

4.4 CITY - ST - ZIP

51 TITLE 5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

CITY-ST-ZIP

98 (561)964-7330

Change

Addition

Addition

FILED

Feb 26 1998 8:00am

Secretary of State