

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

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AND
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95 MAY -1 PM 2:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000024042 (2)

1. Corporation Name

MAIN STREET CLEANERS, INC.

Principal Place of Business

1679 MAIN STREET
SARASOTA FL 34236
US

Mailing Address

1679 MAIN STREET
SARASOTA FL 34236
US

(DO NOT WRITE IN THIS SPACE)

3. Date Incorporated or Qualified

03/30/1993

3a. Date of Last Report

04/18/1994

2. Principal Place of Business

21

2a. Mailing Address

26

4. FEI Number

65-0398358

Applied For

Not Applicable

22. Suite, Apt. #, etc.

22

27. Suite, Apt. #, etc.

27

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

23. City & State

23

28. City & State

28

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

24. Zip

25. Country

29. Zip

30. Country

7. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

COON, MARK
1679 MAIN STREET
SARASOTA FL

81. Name

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

83.

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

(Signature of Registered Agent or Principal Officer or Director)

(Signature of Registered Agent or Principal Officer or Director)

12. OFFICERS AND DIRECTORS

OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12.1. NAME

D
COON, MARK
1679 MAIN STREET
SARASOTA FL

13.1. NAME

☐ Change ☐ Addition

12.2. NAME

D
COON, CHARLENE
1679 MAIN STREET
SARASOTA FL

13.2. NAME

☐ Change ☐ Addition

12.3. STREET ADDRESS

1679 MAIN STREET

13.3. STREET ADDRESS

13.4. CITY, ST, ZIP

12.4. CITY, ST, ZIP

SARASOTA FL

13.5. NAME

☐ Change ☐ Addition

12.5. NAME

D
COON, CHARLENE
1679 MAIN STREET
SARASOTA FL

13.6. NAME

☐ Change ☐ Addition

12.6. STREET ADDRESS

1679 MAIN STREET

13.7. STREET ADDRESS

13.8. CITY, ST, ZIP

12.7. CITY, ST, ZIP

SARASOTA FL

13.9. NAME

☐ Change ☐ Addition

12.8. NAME

13.10. NAME

☐ Change ☐ Addition

12.9. STREET ADDRESS

13.11. STREET ADDRESS

13.12. CITY, ST, ZIP

12.10. CITY, ST, ZIP

13.13. NAME

☐ Change ☐ Addition

12.11. NAME

13.14. NAME

☐ Change ☐ Addition

12.12. STREET ADDRESS

13.15. STREET ADDRESS

13.16. CITY, ST, ZIP

12.13. CITY, ST, ZIP

13.17. NAME

☐ Change ☐ Addition

12.14. NAME

13.18. NAME

☐ Change ☐ Addition

12.15. STREET ADDRESS

13.19. STREET ADDRESS

13.20. CITY, ST, ZIP

12.16. CITY, ST, ZIP

12.17. NAME

13.21. NAME

☐ Change ☐ Addition

12.18. STREET ADDRESS

13.22. STREET ADDRESS

13.23. CITY, ST, ZIP

12.19. CITY, ST, ZIP

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.032(9)(a), Florida Statutes. Further, I certify that the information included in this annual report or supplemental annual report is true and accurate and that my corporation shall have the same legal effect as if made under oath. 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 of this report, or on an attachment with an address.

SIGNATURE:

Mark Coon MARK COON
SIGNATURE AND TYPED OR PRINTED NAME OF BOILING OFFICER OR DIRECTOR

4/29/95

813 365-4700

