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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996 P93000042130 (3) DOCUMENT #

1. Corporation Name

SPIBUK CLEANERS, INC.



						) INDPIRADI KAN IDIDER JUNI ODILI BERKIR DOJAN OGAJU OLIBED JUGAN KITORE ILIMI ODILI GRAN				
Principal Place of I	Business		ng Address							
3810 SO OCEAN DR. 3810 SO OCEAN DR. HOLLYWOOD FL 33004										
HOLLYWOOD	OLLIWOOD PE 330			3. Date Incorporated or Qualified 06/08/1993	3a. Date o	of Last Rep 4/25/19				
Discipal Place	of Business	2a N	Mailing Address			4. FEI Number		Ar	oplied For	
Principal Place of Business		26				<b>65-04 16500</b> Not Applicable				
Suite, Apt. #, etc.			Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional	
1		27							equired	
City & State		T	City & State			6. Election Campaign Financing			May Be	
·		28					Fund Contribution			
Zip	Country		îp	Cou	intry	Florida Statutes Yes	intengible tex	. Unidor S	100.001.	
1	25	29	red Agent	30	Г	10. Name and Address of New F		gent		
	9. Name and Address of Current	negiste	TEG Agont		81 Name					
660 SYF	VILLIADA W JR EDDERAL PIWY				82 Street Addr	ess (P.O. Box Number is Not Acceptal 2058 WW (O	2 Tc	11		
3RD FJ.					°°	wayl Stain	165			
POMPAN			84 City		FL		Code			
•					<u> </u>	and the state of			ostered office	
11. Pursuant to	the provisions of Sections 607.0502	and 607.	.1508, Florida Statu	tes, the abo zed≱iv the	ove-named corpo corporation's boa	ration submits this statement for the purify of directors. Thereby accept the app	oointment as	registered	agent Lam	
or registered familiar with,	and accept the obligations of Secti	on 607.0	505, Florida Statute		1/-2	ration submits this statement for the purificial form of directors. I hereby accept the app	e lu	191	-	
SIGNATURE		$\Lambda$	7 ///	errer,	d'Aprint signature require		DATE	( .		
	mature typed or printer name of registered agent	~		01E Region	er Agent signature require	ADDITIONS/CHANGES TO OF	FICERS AND	DIRECTO	RS IN 12	
12.	OFFICERS AN	DINECT	DISTE		TITLE	7,000,000		] Change	Addition	
TITLE	D DOWNER TEE H		Lagr.		NAME					
NAME	SPIWAK, LEE H 322 E DANIA BEACH BLVD	١			STREET ADDRESS					
STREET ADDRESS		J			CITY - ST - ZIP					
CITY-ST-ZIP	DANIA FL 33004		[ ] DELETE		TITLE		]	Change	Addition	
THTLE	•			22	NAME					
NAME	BUCK, ROGER H 322 E DANIA BEACH BLVI	١		1	STREET ADDRESS					
STREFT ADDRESS	DANIA FL 33004	•			CITY-ST-ZIP					
CITY - S1 - ZIP	DANIA PL 33004		DELETE		TITLE		I	Change	Addition	
TITLE			_	32	NAME					
NAME					STREET ADDRESS					
STREET ADDRESS					CITY - S1 - ZIP					
CITY-ST-ZIP TITLE			DELETE		I TITLE			Change	Addition Addition	
1			-	4.2	NAME					
NAME CTOCCY ADDRESS				4.3	STREET ADDRESS					
STREET ADDRESS				4.4	I CITY - S1 - ZIP					
TITLE			DELETE		1 TITLE			Charige	Addition Addition	
NAME			-	5.2	NAME					
STREET ADDRESS				53	STREET ADDRESS					
CITY-ST-ZIP				5 4	4 CITY-ST-71P			<b>-</b>	F1 Addition	
TITLE			DELETE	6	1 TITLE			Change	Addition	
				1						
NAME				b.:	2 NAME					
NAME expect anodess					2 NAME 3 STREET ADDRESS					
STREET ADDRESS				6.3	3 STREET ADDRESS	y for the exemption stated in Section 1 urate and that my signature shall have I			dea I feether	

certify that the information indicated on this annual report or supplemental annual report is true and accurate and that thy signature shall have the same logic local control 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, or on an attachment with an address.

SIGNIATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR