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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000080044

1. Corporation Name

DONE-RITE CLEANING, INC.

Principal Place of Business	Mailing Ad
11522 STATE RD 84	11522 STAT
SUITE 296	SUITE 296

Apr 25, 1999 8:00 am Secretary of State

04-25-1999 90041 049 ***150.00



Principal Place	e of Business	Mailing Address			-				
11522 STATE F	RD 84	11522 STATE RD 84							
SUITE 296		SUITE 296							
DAVIE FL 3332	25	DAVIE FL 33325				DO NOT WRITE IN	THIS SPACE		
					3. Date Incorporate	ed or Qualifed			
				حرجست خ	11/19/1993			A	ع
2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number		A	pplied For	•
21		26			65-0450639)	N	ot Applicable	
Suite, Apt.	# etc	Suite, Apt. #, etc.					\$8.75	Additional	
	n, 610.	27			Certificate of Sta	atus Desired 🔲	•	equired	
City & Stat		City & State			C. Election Compa	in Cinemains	\$E 00	May Be	
	te .	<u> </u>			6. Election Campa Trust Fund Con	-	-	to Fees	
23	Country		Cour	try				10 1 003	
Zip	_ `	}	_	uy	·	n owes the current ye	ar intanglote ☐ Yes	□No	
24	25	29	30		Personal Proper	iress of New Registe			
	9. Name and Address of Curren	t Registered Agent		81 Name	IV. Name and Add	resa or new regist	orea Agent		
LEG	AL INFORMATION SERVICES, IN	C.		1 50	NORA LA	BERGE			
	D WESTON RD	v .	Ī	82 Street Add	dress (P.O. Box Number	is Not Acceptable)			
	=]	115	22 STATI	6 RA 84	#276		
	TE 214			83		•		}	
, F! L	AUDERDALE FL 33326			84 City			85 Zip	Code	
					AVIC		FL 135	772-5	
11. Pursuant	to the provisions of Sections 607.050	2 and 607-1608, Florida Statu	ites, the ab	ove-named cor	rporation submits this sta	atement for the purpo	se of changing its	registered	
office or i	registered agent, or both, in the State or familiar with, and accept the obligations of the college of the coll	of Florida. Such change was a	authorized	by the corpora	ition's board of directors.	. I hereby accept the a	appointment as re	egistered	
agent. i a	im lamilian/with, and accept the obliga	usits of Section 607.0303, Fit	Ulida Otatu	Co.	•				
	<i>" "</i>	/4					(1. 22.		
SIGNATURE	Produce typed or printed name of registered ager	nt and title if approable. (NOT)	E: Registered	oent signature requi	ired when reinstating)	DA	<u> 4-22-9</u>	7.7	
	ergnature, typed or printed name of registered ager OFFICERS AN			Agent signature requi	ired when reinstating) ADDITIONS/CHA	DA'	TE		
12.	OFFICERS AN	nt and title if approable. (NOT) D DIRECTORS	E: Registered /				TE		
12.	OFFICERS AN	D DIRECTORS	13.	E			TE RS AND DIRECTO	ORS IN 12	:
12. TITE NAME	D LABERGE, SANDRA	D DIRECTORS	13. 1.1 TITI 1.2 NA	E AE			TE RS AND DIRECTO	ORS IN 12	
12. TITLE NAME STREET ADDRESS	D LABERGE, SANDRA 11522 STATE RD 84 SUITE 29	D DIRECTORS	13. 1.1 TITE 1.2 NA/ 1.3 STF	E ME EET ADDRESS			TE RS AND DIRECTO	ORS IN 12	
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LABERGE, SANDRA	D DIRECTORS DELETE	13. 1.1 TITU 1.2 NAV 1.3 STF 1.4 CIT	E ME MEET ADDRESS Y-ST-ZIP			TE S AND DIRECTO ☐ Change	ORS IN 12	
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	D LABERGE, SANDRA 11522 STATE RD 84 SUITE 29	D DIRECTORS	13. 1.1 TITU 1.2 NAV 1.3 STF 1.4 CIT 2.1 TITU	E ME ME METADDRESS Y-ST-ZIP E			TE RS AND DIRECTO	ORS IN 12	
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LABERGE, SANDRA 11522 STATE RD 84 SUITE 29	D DIRECTORS DELETE	13. 1.1 TITI 1.2 NAV 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAV	E AE AE EET ADDRESS Y-ST-ZIP E			TE S AND DIRECTO ☐ Change	ORS IN 12	
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	D LABERGE, SANDRA 11522 STATE RD 84 SUITE 29	D DIRECTORS DELETE	13. 1.1 TITI 1.2 NAV 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAV	E ME ME METADDRESS Y-ST-ZIP E			TE S AND DIRECTO ☐ Change	ORS IN 12	
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	D LABERGE, SANDRA 11522 STATE RD 84 SUITE 29	D DIRECTORS DELETE DELETE	13. 1.1 TITL 1.2 NAJ 1.3 STF 1.4 CIT 2.1 TITL 2.2 NAJ 2.3 STF 2.4 CIT	E AE Y-ST-ZIP E AE AE REET ADDRESS Y-ST-ZIP			TE S AND DIRECTO Change	ORS IN 12 Addition	
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	D LABERGE, SANDRA 11522 STATE RD 84 SUITE 29	D DIRECTORS DELETE	13. 1.1 TITI 1.2 NAV 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAV 2.3 STF	E AE Y-ST-ZIP E AE AE REET ADDRESS Y-ST-ZIP			TE S AND DIRECTO ☐ Change	ORS IN 12	
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LABERGE, SANDRA 11522 STATE RD 84 SUITE 29	D DIRECTORS DELETE DELETE	13. 1.1 TITL 1.2 NAJ 1.3 STF 1.4 CIT 2.1 TITL 2.2 NAJ 2.3 STF 2.4 CIT	E AE EEET ADDRESS Y-ST-ZIP E AE EEET ADDRESS Y-ST-ZIP EEET ADDRESS Y-ST-ZIP E			TE S AND DIRECTO Change	ORS IN 12 Addition	
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	D LABERGE, SANDRA 11522 STATE RD 84 SUITE 29	D DIRECTORS DELETE DELETE	13. 1.1 TITE 1.2 NAV 1.3 STF 1.4 CIT 2.1 TITE 2.2 NAV 2.3 STF 2.4 CIT 3.1 TITE 3.2 NAV	E AE EEET ADDRESS Y-ST-ZIP E AE EEET ADDRESS Y-ST-ZIP EEET ADDRESS Y-ST-ZIP E			TE S AND DIRECTO Change	ORS IN 12 Addition	
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	D LABERGE, SANDRA 11522 STATE RD 84 SUITE 29	D DIRECTORS DELETE DELETE	13. 1.1 TITE 1.2 NAV 1.3 STF 1.4 CIT 2.1 TITE 2.2 NAV 2.3 STF 2.4 CIT 3.1 TITE 3.2 NAV 3.3 STF	E. AE WY-ST-ZIP E. AE AE AE EEET ADDRESS YY-ST-ZIP E. AE AE AE AE AE AE AE AE AE			TE IS AND DIRECTO Change Change	ORS IN 12 Addition Addition	
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	D LABERGE, SANDRA 11522 STATE RD 84 SUITE 29	D DIRECTORS DELETE DELETE	13. 1.1 TITE 1.2 NAV 1.3 STF 1.4 CIT 2.1 TITE 2.2 NAV 2.3 STF 2.4 CIT 3.1 TITE 3.2 NAV 3.3 STF	E. AE EEET ADDRESS Y-ST-ZIP EEET ADDRESS Y-ST-ZIP E AE AE AE AE AE AE AE AE AE			TE S AND DIRECTO Change	ORS IN 12 Addition	
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	D LABERGE, SANDRA 11522 STATE RD 84 SUITE 29	D DIRECTORS DELETE DELETE DELETE	13. 1.1 TITE 1.2 NAV 1.3 STF 1.4 CIT 2.1 TITE 2.2 NAV 2.3 STF 2.4 CIT 3.1 TITE 3.2 NAV 3.3 STF 3.4 CIT	E. AE AE AE AE AE AE AE AE AE A			TE IS AND DIRECTO Change Change	ORS IN 12 Addition Addition	
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	D LABERGE, SANDRA 11522 STATE RD 84 SUITE 29 DAVIE FL 33325	D DIRECTORS DELETE DELETE DELETE	13. 1.1 TITI 1.2 NAI 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAI 2.3 STF 2.4 CIT 3.1 TITI 3.2 NAI 3.3 STF 3.4. CIT 4.1 TITI 4.2 NAI	E. AE AE AE AE AE AE AE AE AE			TE IS AND DIRECTO Change Change	ORS IN 12 Addition Addition	
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	D LABERGE, SANDRA 11522 STATE RD 84 SUITE 29 DAVIE FL 33325	D DIRECTORS DELETE DELETE DELETE	13. 1.1 TITI 1.2 NAV 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAV 2.3 STF 2.4 CIT 3.1 TITI 3.2 NAV 3.3 STF 3.4 CIT 4.1 TITI 4.2 NA 4.3 STF	EE AAE EEET ADDRESS Y-ST-ZIP EEET ADDRESS Y-ST-ZIP EAEET ADDRESS Y-ST-ZIP EAEET ADDRESS Y-ST-ZIP EAEET ADDRESS EEET ADDRESS EEET ADDRESS			TE IS AND DIRECTO Change Change	ORS IN 12 Addition Addition	
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LABERGE, SANDRA 11522 STATE RD 84 SUITE 29 DAVIE FL 33325	D DIRECTORS DELETE DELETE DELETE	13. 1.1 TITI 1.2 NAV 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAV 2.3 STF 2.4 CIT 3.1 TITI 3.2 NAV 3.3 STF 3.4 CIT 4.1 TITI 4.2 NAV 4.3 STF 4.4 CIT	E AE EET ADDRESS Y-ST-ZIP E E EET ADDRESS Y-ST-ZIP E E EET ADDRESS Y-ST-ZIP E E EET ADDRESS Y-ST-ZIP			TE SAND DIRECT Change Change Change	ORS IN 12 Addition Addition	
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	D LABERGE, SANDRA 11522 STATE RD 84 SUITE 29 DAVIE FL 33325	D DIRECTORS DELETE DELETE DELETE	13. 1.1 TITE 1.2 NAV 1.3 STF 1.4 CIT 2.1 TITE 2.2 NAV 2.3 STF 2.4 CIT 3.1 TITE 3.2 NAV 3.3 STF 3.4 CIT 4.1 TITE 4.2 NA 4.3 STF 4.4 CIT 5.1 TITE	E. AE AE AE AE AE AE AE AE AE			TE IS AND DIRECTO Change Change	ORS IN 12 Addition Addition Addition	
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	D LABERGE, SANDRA 11522 STATE RD 84 SUITE 29 DAVIE FL 33325	D DIRECTORS DELETE DELETE DELETE	13. 1.1 TITI 1.2 NAI 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAI 2.3 STF 2.4 CIT 3.1 TITI 3.2 NAI 3.3 STF 3.4 CIT 4.1 TITI 4.2 NA 4.3 STF 4.4 CIT 5.1 TITI 5.2 NAI	E. AE AE AE AE AE AE AE AE AE			TE SAND DIRECT Change Change Change	ORS IN 12 Addition Addition Addition	
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	D LABERGE, SANDRA 11522 STATE RD 84 SUITE 29 DAVIE FL 33325	D DIRECTORS DELETE DELETE DELETE	13. 1.1 TITI 1.2 NAI 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAI 2.3 STF 2.4 CIT 3.1 TITI 3.2 NAI 3.3 STF 3.4 CIT 4.1 TITI 4.2 NAI 4.3 STF 4.4 CIT 5.1 TITI 5.2 NAI 5.3 STF	E. AE AE AE AE AE AE AE AE AE			TE SAND DIRECT Change Change Change	ORS IN 12 Addition Addition Addition	
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS AN D LABERGE, SANDRA 11522 STATE RD 84 SUITE 29 DAVIE FL 33325	D DIRECTORS DELETE DELETE DELETE DELETE	13. 1.1 TITI 1.2 NAI 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAI 2.3 STF 2.4 CIT 3.1 TITI 3.2 NAI 3.3 STF 3.4 CIT 4.1 TITI 4.2 NA 4.3 STF 4.4 CIT 5.1 TITI 5.2 NAI 5.3 STF 5.4 CIT	E. AE AE AE AE AE AE AE AE AE			TE SAND DIRECT Change Change Change	Addition Addition Addition	
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	D LABERGE, SANDRA 11522 STATE RD 84 SUITE 29 DAVIE FL 33325	D DIRECTORS DELETE DELETE DELETE	13. 1.1 TITT 1.2 NAV 1.3 STF 1.4 CIT 2.1 TITT 2.2 NAV 2.3 STF 2.4 CIT 3.1 TITT 3.2 NAV 3.3 STF 3.4 CIT 4.1 TITT 4.2 NAV 4.3 STF 4.4 CIT 5.1 TITT 5.2 NAV 5.3 STF 5.4 CIT 6.1 TITT	E AE			TE SAND DIRECT Change Change Change	ORS IN 12 Addition Addition Addition	
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LABERGE, SANDRA 11522 STATE RD 84 SUITE 29 DAVIE FL 33325	D DIRECTORS DELETE DELETE DELETE DELETE	13. 1.1 TITI 1.2 NAI 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAI 2.3 STF 2.4 CIT 3.1 TITI 3.2 NAI 3.3 STF 3.4 CIT 4.1 TITI 4.2 NA 4.3 STF 4.4 CIT 5.1 TITI 5.2 NAI 5.3 STF 5.4 CIT	E AE			TE SAND DIRECT Change Change Change	Addition Addition Addition	
12. TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	D LABERGE, SANDRA 11522 STATE RD 84 SUITE 29 DAVIE FL 33325	D DIRECTORS DELETE DELETE DELETE DELETE	13. 1.1 TITI 1.2 NAV 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAV 2.3 STF 2.4 CIT 3.1 TITI 3.2 NAV 3.3 STF 3.4 CIT 4.1 TITI 4.2 NAV 4.3 STF 4.4 CIT 5.1 TITI 5.2 NAV 5.3 STF 5.4 CIT 6.1 TITI 6.2 NAV	E AE			TE SAND DIRECT Change Change Change	Addition Addition Addition	

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 or 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR