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

**PROFIT** CORPORATION ANNUAL REPORT



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

1996

DOCUMENT # P9400000036 (1) 1. Corporation Name CENTRAL PARK CLEANERS, INC.											
Principal Place of Business Mailing Address								IIII <b>je</b> iti oota oo		MET WHE THI ITE	
7512-30 DR. PHILLIPS BLVD. ORLANDO FL 32819		SUITE B	301 N. FERNCREEK AVE. SUITE B ORLANDO FL 32803								
							3. Date Incorporated or Qualified 12/30/1993	3a. Date o	Last R /13/1		
2. Principal Place of Busi	ness	2a. Mailing Ad	2a. Mailing Address 6				4. FEI Number Applied For 59-3222593 Not Applied			Applied For Not Applicable	
Suite, Apt #, etc.		Suite, Apt	Suite, Apt. #, etc. 27				5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & State		η	City & State				Election Campaign Financing     Trust Fund Contribution	S5.00 May Be Added to Fees			
Zip Country 25		Zip <b>29</b>	Zip Co		Country		8. This corporation has liability for intangible tax under s 199.03 Florda Statutes  X Yes No				
	11	rrent Registered Ager					0. Name and Address of New F		ent		
_				81	Name						
JOSHI, RAMILA 7512-30 DR. PHILLIPS BLVD.				82	2 Street Adore		ess (P.O. Box Number is Not Acceptable)				
SUITE 30				83				****			
ORLANDO FL 32819				84	City				<b>85</b> Zu	5 Zip Code	
11 Pursuant to the provi	isions of Soctions 607 (	1602 ard 607 1508 fla	oda Statuton tivo abo		vacacl con	Coration	submits this statement for the pur	FL			
or registered agent, o	ar both in the State of E	Florida: Such change wa Seption 607 0505, Florid	is authorized by their	corbi	oration's b	peranoi joard of	directors. Thereby accept the app	rpose or chanç ontment as re	jing its r gistered	egistered office Lagent, Fam	
SIGNATURE	ept the bonganians of, c	363091 007 0303, Fibrid	a orities.								
Signat incluyer	ed or printed man biolingasteries.	agentar fitted applicance.	Marill Highwar	Ay.	t Syriatorensy	persione		DA*E			
12.	OFFICERS		13. ELETE 1 1 T				ADDITIONS/CHANGES TO OFF		IREGIC Change	PRS IN 12 Addition	
NAME JOSHI, RAMILA				1.2 NAME				ш	onange	L. Addition	
STREET ADDRESS 3301 BUTLER BAY DR., NORTH			P .	13 STREET ADDRESS							
	DERMERE FL				1.4.C.TY - ST - ZiP						
TITLE									Change	Addition	
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STREET ADDRESS			238	IHEE1	ADDRESS						
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STREET ADDRESS					ADDRESS						
CITY-ST-7IP			44.01								
THLE		D							Change	Addition:	
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NAME			6 2 N/	AME							
STREET ADDRESS			63\$	'REET	ADORESS						
CITY-ST-ZIP	at the information a mal	nel with this from in 1 of	6 4 Ct			h	e exemption stated in Section 119	Attauts Es ::	- 01		

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 it managed, or on an attachment with an address

SIGNATURE: SIGNA ORE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Dasta a Phone #