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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P9400008684 (0)

UNION PARK DRY CLEANERS, INC.

Principal Place of Business

Mailing Address

## FILED May 08 1997 8:00am Secretary of State



ORLANDO FL	OMAL DR. 32817	10511 E. COLONIAL ORLANDO FL 328174				3. Date Incorporated or Qualified		ite of Last	•
2 Propinal D	Page of Rusings	2a. Mailing Address			· · · · · · · · · · · · · · · · · · ·	02/01/1994 4. FEI Number	1 00/	<u>13/1996</u>	Applied For
2. Principal Place of Business		<del></del>	26			59-3220970		<b></b>	Not Applicable
Suite, Apt #, etc.			Suite, Apt #, etc.				CO 75 A 488		
2		·1	27			5. Certificate of Status Desired			Required
City & Stat	to	City & State				Election Campaign Financing     Trust Fund Contribution			May Be to Fees
Zip 4	Country 25	<b>Z</b> ip <b>29</b>	30 Cot	untry	·		Yes [	] No	s. 199.032,
	9. Name and Address of Cu	irrent Registered Agent			T	10. Name and Address of New Re	gistered /	Agent	
	HER, ROSA			81	Name				
	11 E. COLONIAL DR. ANDO FL 32817		82 Street Ad			fress (P.O. Box Number is Not Acceptab	le)		
				03					
				84	City		FL	<b>85</b> Zij	o Code
11. Pursuant office or agent. La	to the provisions of Sections 607 registered agent, or both, in the Sam familiar with, and accept the o	.0502 and 607.1508, Florida S State of Florida. Such change abligations of, Section 607.050	Statutes, the a was authorize 05, Florida Sta	bove d by	e-named corpora the corpora s.	poration submits this statement for the pation's board of directors. I hereby accept	urpose of of the app	changing ointment a	its registered is registered
SIGNATURE									
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		et agent and title if applicable.		ed Age	ent signature requ	ired when reinstaling)	DATE	DIDECTO	NOC IAL 12
12.	OFFICERS	AND DIRECTORS	13.		ant signature requ	ired when reinstalling) ADDITIONS/CHANGES TO OFFIC			
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12. TILLE NAME	OFFICERS PSD FISHER, ROSA	AND DIRECTORS	13. E 11 T 1.2 N	ITLE					
12. Title Name Street address	OFFICERS PSD FISHER, ROSA 8726 GOPHER LN.	AND DIRECTORS	13. E 11 T 1.2 N 1.3 S	ITLE IAME TREET	T ADDRESS				
12. Tille Name Street adoress City-St-Zip	OFFICERS PSD FISHER, ROSA	AND DIRECTORS	13. E 11 T 1.2 N 1.3 S 1.4 C	ITLE IAME STREET					Addition
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14. I do 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, or on an attachment with an address.

SIGNATURE:

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

//30/97 407-658-2641

Daytime Phone #