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

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P94000038647 (1)

PNT COUNTRY CLUB CLEANERS, INC.

Principal Place of Business

indicated on this annual report officer or director of the corpor Block 12 or Block 13 if charge

Mailing Address

ment with an address.

## **FILED** Mar 20 1998 8:00am Secretary of State



The provision of Sections 607.0502 and 607.1508, Florida Statutes, the above-named opporation's board of directors   hereby accept the appointment as registered agent   1.0 Name and Address of Opporation's Country   28   30   30   30   30   30   30   30   3	1714 WEST AIRPORT BLVD. SANFORD FL 32771		1714 WEST AIRPORT BLVD. SANFORD FL 32771		DO NOT WOITE IN	TI 110 00 4 0 5		
2. Pyropial Papes of Buyloss St. 22 Maring Address St. 22 Maring St. 22 Maring St. 22 Maring Address St. 22 Maring						3. Date Incorporated or Qualified	THIS SPACE	
Section Campaign Financing   Section Country   Section Campaign Financing   Section Campaign Financing Financing   Section Campaign Financing Fi	2. Principal Pi	ace of Business/	2a. Mailing Address				I IA	polied For
22) The Space   27   The Space   28   Space	21 292/5. OFTando 15 26 292/5.			Klanda	/) ~		<del></del>	• • • • • • • • • • • • • • • • • • • •
Country 28 System	一 で7. <sup></sup>	Suite, Apt. #, etc.				<b>\$8.75</b>	\$8.75 Additional Fee Required \$5.00 May Be	
20   20   20   20   32   73   30   Country   25   32   73   30   Country   25   Name and Address of Current Registered Agent   10. Name and Address of New Registered Agent   1714 WEST AIRPORT BLVD.   SANFORD FL 32771   81   Name   20   Sanford Agent   20   Sa	City & State	City-8 State				\$5.00		
YATES, PETER J 1714 WEST AIRPORT BLVD. SANFORD FL 32771  11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Floride Statutes, the above-named corporation submits this eletement for the purpose of changing its 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, 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 itemiar with, and accept the obligations of Sections 607 0505. Broad Statutes.  SIGNATURE  12. OF FICE HS AND DIRECTORS.  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  14. OFFICE HS AND DIRECTORS.  15. STREET ADDRESS  OITY-ST-2P  1714 WEST AIRPORT BLVD.  15. STREET ADDRESS  OITY-ST-2P  10. DELETE  11. TITLE  12. YAME  22. SANET ADDRESS  OITY-ST-2P  13. STREET ADDRESS  OITY-ST-2P  14. OFFICE HS AND DIRECTORS.  15. STREET ADDRESS  OITY-ST-2P  16. DELETE  17. TITLE  17. STREET ADDRESS  OITY-ST-2P  OIT STREET ADDRESS  OITY-ST-2P  OIT STREET ADDRESS	Zip	Country	250 DA DA	Country		<del></del>		
VATES, PETER J   1714 WEST AIRPORT BLVD.   SANFORD FL 32771	24 327			30		Personal Property Tax due June 30.	Yes [	<u> </u>
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Stetutes, the above-named corporation submits this eletement for the purpose of changing its registered office or registered agent, or both in the State of Indica Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered spent. I am familier with, and accept the obligations of, Section 607.6505, Florida Stetutes.  SIGNATURE  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  DELETE  1.1 TITLE  VATES, PETER J  1.2 NAME  1.2 NAME  1.2 NAME  1.2 NAME  1.3 SIREFL ADDRESS  CITY-ST-2P  SANFORD FL  1.3 TITLE  1.4 CITY-ST-2P  1.4 CITY-ST-2P  1.4 CITY-ST-2P  1.5 SIREFL ADDRESS  CITY-ST-2P  1.5 SIREFL ADDRESS  CITY-ST-2P  1.6 Change  1.7 Addit NAME  1.8 SIREFL ADDRESS  CITY-ST-2P  1.8 SIREFL ADDRESS  SIREFL ADDRESS	VAT		Triegistorea Agent	81 Nam	 e	IV. Harris allu Addissa Ol Haw Nagisi	ered Agent	
II. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation, submits the etatement for the purpose of change is registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, the above-named 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: Lyrad or predict number of registered depoint and steril applicable.   (ROTE Registered Agent signature required when reinstating)   DATE	171	4 WEST AIRPORT BLVD.		82 Sygg 63	d Addre	ss (P.O. Box Number (6) Not Accomplete)	57e	190
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits the elatement for the purpose of changing its registerer agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.    SIGNATURE				84 City	<del>-</del>	(Tr.()	FI 85 20	5997.7
Signature, typed for protect have all registered agent all signatures depend under dependation of pendative dependation	11. Pursuant to office or reagent. I ar	o the provisions of Sections 607.0502 gistered agent, or both, in the Stale in familiar with, and accept the obliga	? and 607.1508, Florida Statutes of Florida. Such chango was au tions of, Section 607.0505, Flor	s, the above-name athorized by the co ida Statutes.	d corpo rporatio	oration submits this statement for the purpon's board of directors. I hereby accept the	ose of changing i	its registered registered
TITLE	SIGNATURE	Signature, typed or printed name of registered age	it and the if applicable (NOTE:	Registered Agent signal	re required	d when reinstating) G	JATE	
NAME   STREET ADDRESS   1714 WEST AIRPORT BLVD.   1.3 STREET ADDRESS   1.4 CITY-S1-ZIP   1.7 CITY-S1	12.			13.	,	ADDITIONS/CHANGES TO OFFICERS		
1.3 STREET ADDRESS   1714 WEST AIRPORT BLVD.   1.3 STREET ADDRESS   1.4 CITY-ST-ZIP   SANFORD FL	TITLE	<del>-</del> -	☐ DELETE	1.1 TITLE	1		Change	Addition
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CiTY-ST-ZIP 64 CITY-ST-ZIP								
14. Thereby 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 of 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	14. I hereby ce	ertify that the information supplied wit	h this filing does not qualify for	the exemption sta	led in Se	ection 119.07(3)(i), Florida Statutes. I furth	er certify that the	information