

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

**APPROVED
AND
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55 MAY -1 AM 8:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra H. Maysinger
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P94000048037 (3)**
1. Corporation Name
SEAVIEW CLEANERS, INC.

Principal Office of Business: **262 95TH ST SURFSIDE FL 33154**
Mailing Address: **262 95TH ST SURFSIDE FL 33154**

2. Filing jurisdiction: **21**
2a. Mailing Agency: **26**
3. Date incorporated or qualified: **06/22/1994**
3a. Date of Last Report: **06/22/1994**
4. FEI Number: **65-0504912**
Applied For: Not Applicable:

DO NOT WRITE IN THIS SPACE

5. Certificate of Status Desired: **\$8.75 Additional Fee Required**
6. Election Campaign Financing: **\$5.00 May Be Added to Fees**
7. Trust Fund Contribution:
8. This corporation has liability for intangible tax under § 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent
**EHREN, PETER G
262 95TH ST
SURFSIDE FL 33154**

10. Name and Address of New Registered Agent
81. Name: _____
82. Street Address (P.O. Box Number is Not Acceptable): _____
83. _____
84. City: _____
85. Zip Code: **FL**

11. Pursuant to the provisions of Sections 607.0902 and 607.1205, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office for the purpose of both in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby agree to the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0905, Florida Statutes.

SIGNATURE: _____ DATE: _____

12. OFFICE REGISTERED DIRECTORS

12.1	D
NAME	EHREN, PETER G
Street Address	262 95TH ST
City	SURFSIDE FL 33154
12.2	
NAME	
Street Address	
City	
12.3	
NAME	
Street Address	
City	
12.4	
NAME	
Street Address	
City	
12.5	
NAME	
Street Address	
City	

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS

13.1		<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.2		
13.3		<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.4		
13.5		<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.6		
13.7		<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.8		
13.9		<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.10		
13.11		<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.12		
13.13		<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.14		
13.15		<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.16		
13.17		<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.18		
13.19		<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.20		

14. I hereby certify that the information supplied with this filing is truthfully furnished and that I am equally for the reasons stated in Section 199.032, Florida Statutes. I further certify that the information included in 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 the same effect as if made under oath of the corporation of the removal of directors is reported to occur in this report as required by Chapter 199, Florida Statutes, and that my name appears on the back of the report as required by the same Chapter with an address.

SIGNATURE: *Peter Ehren* **P. EHREN PRES** **4-28-95**
SIGNATURE AND TYPED OR PRINTED NAME OF GOING OR NEW DIRECTOR