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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P94000049004 (2)

AKD CLEANERS, INC.

**FILED** May 06 1998 8:00am Secretary of State



FIIICIPALFIAC	e of pusitioss	Maning Abdress			
888 SOUTH PATRICK DRIVE SATELLITE BEACH FL 32937		668 SOUTH PATRICK DRIVE SATELLITE BEACH FL 32837			
GATELLITE BEAGATTE SESSI		SAILLINE DEAGN TE SESSY			DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualified
					06/30/1994
2. Principal Place of Business 2a. Mailing Address					4. FEI Number Applied For
21		26	5		<b>59-3259669</b> Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			S8 75 Additional
22 City & State	<del></del>	27			Fee Required
23		City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country		8. This corporation owes or has paid the current year Intangible
24	25	[29]	30		Personal Property Tax due June 30.  Yes No
g. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent
Pik	KE, DONALD H		81	Name	
668 SOUTH PATRICK DRIVE			82	Stroot A	ddress (P.O. Box Number is Not Acceptable)
SATELLITE BEACH FL 32937					duress (F.O. Box number is Not Acceptable)
			83		
			84	City	FL 85 Zip Code
11, Pursuant office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State of	and 607.1508, Florida Statuti of Florida, Such change was a	es, the above	e-named c y the corpo	corporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered
SIGNATURE	m <b>fa</b> miliar with, and accept the obligat		orida Statute	S.	
	Signature, typed or printed name of registered agen			ent signature re	equired when reinstating) DATE
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD KATHARYN	☐ DELETE	1.1 TITLE		Change Addition
NAME	ANDERSON, <del>Katherin</del> e a		1.2 NAME		
STREET ADDRESS	668 SOUTH PATRICK DRIVE		1.3 STR[-{-	ADDRESS	
CITY-ST-ZIP	SATELLITE BEACH FL 32937		1.4 CITY - 9	ST- <b>Z</b> IP	
TITLE	VSTD	☐ DELE <b>te</b>	2.1 TITLE		Change Addition
NAME	PIKE, DONALD H		2.2 NAME		
STREET ADDRESS	106 CHRISTINE CIRCLE		2.3 STREET ADDRESS		
CITY-ST-ZIP			2. 4 CITY-	ST-ZIP	
TITLE	VPD	DELETE	3.1 TITLE		Change Addition
NAME	PIKE, ARLENE M		3.2 NAME		
STREET ADDRESS	106 CHRISTINE CIRCLE		3.3 STREET	ADDRESS	
CITY-ST-ZIP	AATELLITE BELOIL EL AGOAT		3.4 CITY-		
TITLE		DELETE	4.1 TITLE	-	Change Addition
NAME		<del></del>	4. 2 NAME		The state of the s
STREET ADDRESS			4.3 STREET	ADDRESS	
CITY-ST-ZIP			4.4 CITY- S	T-ZIP	
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET	ADDRESS	
CITY-ST-ZIP	_		5.4 CITY - S	IT-ZIP	
TITLE		☐ DELETE	61 TITLE		Change Addition
NAME			62 NAME		- <del>-</del>
STREET ADDRESS			6.3 STREET	ADDRESS	
CITY-ST-ZIP			6.4 CITY - S		
14. I hereby c	ertify that the information supplied will	this filing does not qualify fo	r the exemp	tion stated	in Section 119.07(3)(i), Florida Statutes. I further certify that the information
officer or o	<b>on this annual report</b> or supplemental.	annual report is true <b>and a</b> cci ver or trustee empower <b>ed</b> to c	urate and the	at my sion.	ature shall have the same legal effect as if made under oath; that I am an equired by Chapter 607, Florida Statutes; and that my name appears in