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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Katherine Harris'

Secretary of State DIVISION OF CORPORATIONS

1999 **DOCUMENT #**

Apr 16, 1999 8:00 am Secretary of State

04-16-1999 90075 017 ***150.00

	To Beth Fut								
Principal Place of Business DDA - faddock Park Cleaners						•			
3/01 SW 34th ave #104					DO NOT WRITE IN THIS SPACE				
Ocala. F1. 34474					3. Date Incorporated or Qualified				
2. Principal F	2. Principal Place of Business 2a. Mailing Address 26				59-32554	90	+ • •	lied For Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc. 27			C.		5. Certifcate of Status Desired	1 1	\$8.75 Additional Fee Required		
City & State City & State					6. Election Campaign Financing	□ \$5	.00 M	lay Be	ł
23 28					Trust Fund Contribution	A	ided to	Fees	
Zip	Country	Zip	Cou	ntry	8. This corporation owes the cur				
			30		Personal Property Tax.	ZYe:	<u> </u>	٠,٠	1
	9. Name and Address of Curren	t Registered Agent		81 Name	10. Name and Address of New	Registered Agent			}
ΩL	WILL TRUY	idine		Name					
Physis J. Burdine 1522 NE 9th st. Ocala. H. 34470 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, t				82 Street Ad	t Address (P.O. Box Number is Not Acceptable)				
				83					ł
				63					
				84 City		FL 85	Zip Co	ode	i
				novo nomod co	moration submits this statement for the		on its re	nietered	
office or a	registered agent, or both, in the State of the familiar with, and accept the obligations.	of Florida. Such change v	was authorized	by the corpora	ation's board of directors. I hereby acce	ot the appointment	as regi:	stered	
SIGNATURE]
43	Signature, typed or printed name of registered agen OFFICERS AN		(NOTE: Registered	Agent signature requ	ired when reinstating) ADDITIONS/CHANGES TO OF	DATE	CTOR	S IN 12	8
TITLE	D/PRESIDENT	DIRECTORS			ADDITIONS/CHANGES TO CI	□ Ch		Addition	(11/98)
NAME	PHYLLIS J. BURDINE			ME I					
STREET ADDRESS	1 - 0			REET ADDRESS					2F034
	DCALA. FC 34470			Y-ST-ZIP					2
CITY-ST-ZIP TITLE	DELETE			1-31-21F		☐ Ch	ange	Addition	5
NAME	George LORENZ			ME		_			l
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TITLE	DISECTIFES.	□ DELE				□ Ch	ange	Addition	l
NAME	PAMELA D. LO	e e NZ	3.2 NA	ME .					l
STREET ADDRESS	7545 NE 8-57		3.3 81	REET ADDRESS					-
CITY-ST-ZIP	OCALA.FL 34	470	3.4. CI	ry-st-zip					l
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CITY-ST-ZIP				Y-ST-ZIP					ĺ
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STREET ADDRESS	•			REET ADDRESS				Ì	
CITY-ST-ZIP			6.4 CIT	Y-ST-ZIP					

14. I 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, with all other like empowered.