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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Sep 16, 1999 8:00 am Secretary of State

09-16-1999 90014 018 ***550.00

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DOCUMENT	# P 94000087972	

1. Corporation Name

RAZDOL CLEANERS, INC.

Principal Place of Business							
13910 SW 56TH STREET	13910 SW 56TH	STREET					
MIAMI, FL 33175	MIAMI, FL 33175		DO NOT WRITE IN THIS SPACE				
			3. Date Incorporated or Qualifed 12/01/94				
2. Principal Place of Business	2a. Mailing Address		4. FEI Number 65-0542196	Applied For			
21	[26] 292 S. TRADEW	INDS AVE	05-0542190	Not Applicable			
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & State	City & State 28 FT.=LAUDERDALE FL		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zip Country 24 25	Zip Cox 29 33308 30	untry	This corporation owes the current year In Personal Property Tax.	ntangible □ Yes			
9. Name and Address of Current	10. Name and Address of New Registered	d Agent					
CONTRACTOR, SHEZAD		81 Name SH	HAHAB KIDWAI				
13910 SW 56TH STREET MIAMI, FL 33175		82 Street Address	Street Address 2P. S. Box Humber is Not Affectable AVE				
MIAMI, 15 33173		83					
		84 City F7		85 Zig Gg 90 8			
11. Pursuant to the provisions of Sections 607.0502	and 607.1508, Florida Statutes, the a	bove-named corpor	ation submits this statement for the purpose of	of changing its registered			

agent. I am familiar with, and accept the bigations of, Section 607.0505, Florida Statutes.						2090	4			
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE										
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12										
TITLE		DELETE	1.1 TITLE	,		☐ Change	☐ Addition			
NAME	CONTRACTOR, SHEZAD		1.2 NAME							
STREET ADDRESS	13910 SW 56TH STREET		1.3 STREET ADDRESS				j			
CITY-ST-ZIP	MIAMI, FI.		1.4 CITY-ST-ZIP							
TITLE	VSTD	DELETE	2.1 TITLE			☐ Change	☐ Addition			
NAME	KIDWAI, NAJMA		2.2 NAME							
STREET ADDRESS	13910 SW 56TH STREET		2.3 STREET ADDRESS	-	-					
CITY-ST-ZIP	MIAMI, FL		2. 4 CITY-ST-ZIP			-5-01	Addition			
TITLE	D	☐ DELETE	31 TITLE	PRESIDENT/	DIFECTOR	X Change	☐ Addition			
NAME	_		3.2 NAME	- · ·			l			
STREET ADDRESS	KIDWAI, SHAHAB		3.3 STREET ADDRESS							
CITY-ST-ZIP	13910 SW 56TH STREET	1	3.4. CITY-ST-ZIP							
TITLE	MIAMI, FL	DELETE	4.1 TITLE	<u> </u>		☐ Change	☐ Addition			
NAME	D		4. 2 NAME							
STREET ADDRESS	CONTRACTOR ROSHAN		4.3 STREET ADDRESS							
CITY-ST-ZIP	13910 SW 56TH STREET		4.4 CITY-ST-ZIP							
TITLE	MIAMI, FL	☐ DELETE	5.1 TITLE			☐ Change	Addition			
NAME			5.2 NAME							
STREET ADDRESS			5.3 STREET ADDRESS							
CITY-ST-ZIP			5.4 CITY-ST-ZIP							
TITLE		☐ DELETE	6.1 TITLE			☐ Change	Addition			
NAME			6.2 NAME							
STREET ADDRESS			6.3 STREET ADDRESS							
CITY-ST-ZIP	<u></u>		6.4 CITY-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.

SIGNATURE: