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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P95000031612 (1)

ALL STARS CLEANERS, INC.

Principal Place of Business Mailing Address 6301 W. COMMERCIAL BLVD. 6301 W. COMMERCIAL BLVD. TAMARAC FL 33319 TAMARAC FL 33319-2318 3. Date Incorporated or Qualified 3a. Date of Last Report 04/19/1995 05/01/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0591739 26 Not Applicable 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Country Zip Zip Country 8. This corporation has liability for intangible tax under s. 199.032, Yes No 30 24 25 29 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name POY-WING, CELINA 4841 S.W. 76TH AVENUE Street Address (P.O. Box Number is Not Acceptable) **DAVIE FL 33328** 83 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or 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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Signating typed or printed name of registered agent and tille if applicable (NOTE Registered Agent signature required when reinstating) 12 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE 1.1 TITLE Change Addition TITLE POY-WING, CELINA 1.2 NAME NAME 4841 S.W. 76TH AVENUE STREET ADORESS 1.3 STREET ADDRESS **DAVIE FL 33328** 1.4 City-St-ZiP CRY-SI-ZIF DELETE Addition THE 21 TITLE Change GOMEZ, ANTONIA NAME 2.2 NAME **4841 S.W. 76TH AVENUE** 2.3 STREET ADDRESS STREET ADDRESS DAVIE FL 33328 2. 4 CITY+ST-ZIP CITY-ST-7/2 DELETE Addition Change DILLE 3.1 TITLE NAME 3.2 NAME SPREET ADDRESS 3.3 STREET ADDRESS CHY - S1 - 769 3.4. CITY-ST-ZIP DELETE Addition 4.1 TITLE TIME NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS DITY-ST-7IP 4.4 CITY-ST-ZIP DELETE Change \_\_\_ Addition 5.1 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-20 DELETE Change Addition THEF 61 TITLE

> 6.2 NAME 6.3 STREET ADDRESS

14. I do 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 eath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 807, Florida Statutes, and that my name

SIGNATURE

STREET ADDRESS

ATURE AND TYPEO OR PRINTED NAME OF SIGNING OFFICER OF AMECTOR

changed, or on an attachment with an address.

5/1/97 434-9182

**FILED** 

May 14 1997 8:00am

Secretary of State