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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # P95000038894 (8)

COLDOLAROL Maille			
AMERICANA	BEST	CLEANING,	INC.

Principal Place	of Business	Mailing Address			***************************************	
22467 FOUNTIAN LAKES BLVD. ESTERO FL 33928		22467 FOUNTIAN LA ESTERO FL 33928	ikes blvd.			
				3. Date Incorporated or Qualified 05/16/1995	3a. Date of Last Report	
2. Principal Pla 21	ce of Business	2a. Mailing Address 26		4. FEI Number 65-0583688	Applied For Not Applicable	
Suite, Apt. #	/, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 24	Country 25	Z ₁ p 29	Country 30	8. This corporation has liability for inta Florida Statutes Yes .	Z No	
	9. Name and Address of Currer	t Registered Agent		10. Name and Address of New Regi	Istered Agent	
			81 Name			
NASH, MAYELA H. C 22487 FOUNTIAN LAKES BLVD.		82 Street Add	82 Street Address (P.O. Box Number is Not Acceptable)			
	FL 33928		83			
			84 Orty		85 Zip Code	
			04 0119		FL S Z D COCCO	
or registere	o the provisions of Sections 607.0502 ed agent, or both, in the State of Flori h, and accept the obligations of, Sect	da. Such change was autho	rized by the corporation's boa	ration submits this statement for the purpos and of directors. I hereby accept the appoint	se of changing its registered office ment as registered agent. I am	
SIGNATURE _						
	Signarure, typed or printed name of registered a perf		NOTE: Finglishered Agent's greative require		DATE	
12. HILF	PTD OFFICERS AN	D DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICE	Change Addition	
NAME	NASH, MAYELA H. C	L) Dettere	1. 1 TITLE 1.2 NAME		Change C Notition	
STREET ADDRESS	22467 FOUNTIAN LAKES BL	VD.	1.3 STREET ADDRESS			
CITY-ST-ZIP	ESTERO FL 33928					
TITLE	VD	T DELETE	1.4 CHY-SI-ZIP 2 1 TULE		Change Addition	
NAME	HIDALGO, CARMEN C		2 2 NAME		El out igo El viscion	
STREET ADDRESS	22467 FOUNTIAN LAKES BL	VD.	2 3 STREET ADDRESS			
CITY-\$1-7IP	ESTERO FL 33928		2 4 CITY - S1 - ZIP			
TITLE	SD	[] DELETE	3. 1 TITLE		Change Addition	
NAME	CORDERO, ROSIBELLE H		3.2 NAME			
STHEET ADDRESS	22467 FOUNTIAN LAKES BL	VD.	3.3 STREET ADDRESS			
CITY-ST-ZIP	ESTERO FL 33928		3 4 CITY - S1 - ZIP			
TITLE		[] DELETE	4. 1 TITLE		Change Addition	
NAME			4.2 NAME			
STREET ADDRESS			4.3 STREET ADORESS			
CITY-SI-ZIP			4.4 CITY - ST - ZIP			
TITLE		[] DELETE	5 17/ILE		Change Addition	
NAME			5.2 NAME			
STREET ADDRESS			5 3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY - \$1 - 2IP			
TITLE		DELETE	6.1 TITLE		Criange Addition	
NAME			6.2 NAME			
STREET ADDRESS	,		6.3 STREET ADORESS			
CITY-ST-ZIP	•		6.4 CHY+ST+24P			

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 on powered 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.

SIGNATURE:

SIGNATURE:

SIGNATURE SIGNATURE SIGNING OFFICER OR DIRECTOR