FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 PROFIT FLORIDA DEPARTMENT OF STATE

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortnam Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # P95000055025 (7)
1. Corporation Name

TALA CLEANERS, INC.

Principal Place of Rusiness

Mailing Address



JACKSONVI	IEADOWS RD SUITE 1 ILLE FL 32256		5230 BAYMEADOWS RD SUITE 1 JACKSONVILLE FL 32256						
						3. Date Incorporated or Qualified 07/12/1995	3a. Date o	f Last Repor	rt
2. Principal Plac	ce of Business	2a. Mailing Add	iress			4. FEI Number		Арр	lied For
21		26				59-332655			Applicable
22		27	_1			5. Certificate of Status Desired		\$8.75 Ac Fee Req	
City & State		City & State) 	1017		Election Campaign Financing Trust Fund Contribution		\$5.00 N Added to	Fees
Zip 24	Country 25	Ζφ 29	30	Country		8. This corporation has liability for in Florida Statutes Yes	(L)No		9.032,
	g. Name and Address of Curr	ent Registered Agent	! 			10. Name and Address of New R	egistered Ag	gent	
•	A			81	Name				
	oush, John Old St Augustine Road :	#809		82	Street Addr	ress (P.O. Box Number is Not Acceptabl	e)		
JACKS	SONVILLE FL 32257			83					
				84	City		FL	85 Zip Co	ode
familiar with SIGNATURE	n, and accept the obligations of, So Significal protos protos rube or eighborise	ection 607.0505, Florida	a Statutes	čeren Ager		ration submits this statement for the pur rd of directors. Thereby accept the appoint characteristics.	DATE		
12.		AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFI			
TITLE	PD	☐ DE	LETE 1	1 THUE	1		1 1	Change [Add-tion
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NAME	HANNOUSH, JOHN	INC DO 4000		1.2 NAME					
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• Too measy certify that the information supplied who his 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 of 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 articles.

SIGNATURE:

MATURE AND TIPE OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

921/251-9886 50-5-1-96 CR2E034 (12/9