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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Mar 31 1997 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

| COUN Principal Pi | TRY MALL CLEANERS, INC. | Mailing Address | | - | | | | | |
|--|---|--|---|--------------|---------------------|--|--------------|--------------------|-----------------------|
| 1544S S.W. 145 COURT MIAMI FL 33177 | | 15445 8.W. 145 COUR MIAMI FL 33177-6817 | 15445 8.W. 145 COURT MIAMI FL 33177-8817 | | | | | | |
| ! | | | | | | 3. Date Incorporated or Qualified 02/09/1996 | Sa. Da | te of Last R | teport |
| 2. Pancipal | Place of Business | 2a. Mailing Address | | | ~ | 4. FEI Number | | Aı | oplied For |
| 21 | A di at | Suite, Apt. #, etc. | | | | 65-0649632 | - | | ot Applicable |
| Suite Ag | т н. ев | Stiffe, Apt #, etc. | | | | 5. Certificate of Status Desired | | \$8.75 . Fee Ro | Additional equired |
| City & St | 350 | City & State | | | , | 6. Election Campaign Financing | <u></u> | \$5.00 | · |
| 23 | | 28 | | | | Trust Fund Contribution | | | to Fees |
| Z _i p | Country | Z(p | } 7 | untry | ' | 8. This corporation has liability for i | | tax under s ∐No | . 199.032, |
| 24 | 25 9. Name and Address of Curre | 29 N Registered Agent | 30 | Τ | | Florida Statutes 10. Name and Address of New Re | | | |
| SI | IDDIOKARA, ABDUR R | | | 81 | Name | | | - | |
| 15445 S.W. 145 COURT | | | | 82 | Street Add | ress (P.O. Box Number is Not Acceptab | le) | | |
| M | iami FL 33177 | | | | 00000 | | ···· | | |
| • | | | | 83 | | | | | |
| | | | | 84 | City | ······································ | FL | 85 Zip | Code |
| agent. SiGNATURI | | | | | | coration submits this statement for the p tion's board of directors, thereby accep and when reinstating) | DATE | | |
| 12, | | D DIRECTORS | 13, | | | ADDITIONS/CHANGES TO OFFIC | ERS AND | | |
| THILE | D/P | DELETE | 111 | | | | | Change | Addition |
| PYA. | SIDDIQKARA, ABDUR R 15445 S.W. 145 COURT | | 121 | | | | | | |
| STHEE ADDRESS | MIAMI FL 33177 | | 1 | | ADDRESS | | | | |
| 111,F | Will will 1 E GOTT | DELETE | 1.4 U | | ST - ZIP | | | Change | Addition |
| NAME | | | | IAME | - | | | . = . ** | • |
| STAFEL ADI 🙃 | e | | 2.3 \$ | IREE | ADDRESS | | | | |
| CAT So Zir | | | | | ST - ZIP | ************************************** | | | |
| Total | | DELETE | 311 | | ļ | | | Change | Addition |
| M.M: | dr. | | | LAME | ADDRESS | | | | |
| STREET ALTONES | 6) | | 1 | | ADDRESS ST-ZIP | | | | |
| ETILE | | DELETE | 41 T | | 51.7211 | | | Charige | Addition |
| NAM: | | | | NAME | | | | | |
| l I STRELLI ABUREN | 8 | | | | ADDRESS | | | | |
| CHY SI-71 | | | 4.40 |)TY - 9 | ST-ZIP | | | | |
| 111.6 | | ☐ DELETE | 51 T | ITLE | | | | Change | Addition |
| Navt | | | 521 | IAME | 1 | | | | |
| STREET ADDRESS | å l | | 5.3 \$ | TREET | ADDRESS | | | | |
| CITY ST BY | | T acres | | | St - ZIP | | | T T OF THE | 1 4422 |
| lit F | J | DELETE | 611 | ITLE | Į. | | | Change | Addition |

14. Lide hereby certify that the information supplied with this filling 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 supplimental 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 faceiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP

SIGNATURE:

NAM-

CHY ST ME

Abdus R. Siddig KARA 3-10-97

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