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

PROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham *

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

P96000091188 (8)

CRICKET CLEANERS OF CORAL SPRINGS, INC.

FILED May 22 1998 8:00am Secretary of State

ONIONET OFFICERS OF COMAL	or finado; into:				
Principal Place of Business	Mailing Address			4 (RB) (1867) (9 10) (R D) (1) (B) (1) (B) (1) (B) (1)	A ININI LINKS TINNS TAINT TAIL TAIL
11331 W ATLANTIC BLVD 11331 W ATLANTIC BLVI CORAL SPRINGS FL 33071 CORAL SPRINGS FL 330		LVD			
		13071		DO NOT WRITE IN THE	¢ QDACE
				3. Date Incorporated or Qualified	3 3FACE
					l
2. Principal Place of Business	2a, Mailing Address			11/04/1996 4, FEI Number	Applied For
21 26				65-0736623	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.					\$8.75 Additional
27				5. Certificate of Status Desired	Fee Required
City & State City & State				6. Election Campaign Financing	\$5.00 May Be
23	28			Trust Fund Contribution	Added to Fees
Zip Country Zip		Country	y	8. This corporation owes or has paid the o	
24 25	29	30		Personal Property Tax due June 30.	Yes No
g. Name and Address of Currer	t Registered Agent	81	T	10. Name and Address of New Registere	d Agent
* CARDONA, ELIZABETH			Name		
14580 FARFAX PL DAVIE FL 33325		82	Street Add	dress (P.O. Box Number is Not Acceptable)	
			 		
•		83	1		
		84	City		■ 85 Zip Code
			<u> </u>	F	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the office or registered agent, or both in the State of Llorida, Such change was author			e-named cor v the cornors	rporation submits this statement for the purpose ation's board of directors. I hereby accept the a	of changing its registered population
office or registered agent, or both, in the State of Floridal 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.					
SIGNATURE					
			ent signature requ	uired when reinstating) DATE	ND DIDECTORO III 40
12. OFFICERS AND DIRECTORS TITLE STD DELETE		13.		ADDITIONS/CHANGES TO OFFICERS A	Change Addition
,					C Cutange C Macintari
NAME CARDONA, ELIZABETH STREET ADDRESS 11331 W ATLANTIC BLVD		1.2 NAME	* 40000000		
000H 000H00 FL 00074		1	T ADDRESS		
THE VEPCARDOUR WILFREDO DELETE		1.4 CITY - : 2.1 TITLE	ST-ZIP		Change Addition
NAME 1133, WATLANTIC BLUD		22 NAME			C onaing C noonien
ME 11991 W 14 CANNIC DEVIS			* ADDDCCC		
STREET ADDRESS C DAAL SPANICS FL 37071		2.4 CITY-	1 ADDRESS		
CITY ST-70P DELETE		31 TITLE	51-2IF		Change Addition
NAME NAME NAME NAME ALLOW		3.2 NAME			
11 231 W HT LANTIC 13111		3.3 STREET	T ADDRESS		
ITY-ST-ZIP CONALSPAINES FL 3327)		3.4. CITY-	1		
TITLE	DELETE	4.1 TITLE	31-211		Change Addition
NAME	•	4. 2 NAME			, —
STREET ADDRESS		1	T ADDRESS		
CITY-SI-ZIP		4.4 City-			
TITLE	DELETE	5.1 TITLE	51-74		Change Addition
NAME		5.2 NAME)		
STREET ADDRESS			ADDRESS		
CITY-ST-ZIP		5.4 City-	ļ		}
TITLE	DELETE	6.1 TITLE	27 4.0		Change Addition
NAME		6.2 NAME		9000025347	
STREET ADDRESS		T I	T ADDRESS	-05/ 26/98010350	111 V/W
				***150.00	· · · · · · · · · · · · · · · · · · ·
CITY-ST-ZIP		64 CITY-	51-20	n Conting 110 07/9Vi) Florida Statuton I further	

r nereby 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 suppliemental 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.

4-17-98 (950)341-1347