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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

FILED May 07, 1999 8:00 am Secretary of State

05-07-1999 90009 006 ***150.00

DOCUMENT # P9700003311 1. Corporation Name CLASSIC CLEANERS, INC.										
Principal Place of Business Mailing Address										
14775 SO. DIXIE Miami FL 33176	HIGHWAY	14775 SO. DIXIE HIGHWAY MIAMI FL 33176					DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed			
						•	01/13/1997			
2. Principal Place of Business		2a. Mailing Address				4.	FEI Number		Applied For	
21		26					65-0737850		Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5.	Certificate of Status Desired	•	75 Additional e Required	
City & State		City & State					Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip	Country	Zip	Co	untry		8.	This corporation owes the current year	r Intangible		
24	25	29	30				Personal Property Tax.	☐ Yes	□No	
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent					
	BANDERWALA, MINAZ SO DIXIE HIGHWAY			81 82	Name Street Add	ress (F	P.O. Box Number is Not Acceptable)			

MIAMI FL 33143

	10. Name and Address of New Registered Agent
81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City 85 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.

ugu				•			
SIGNATURE	Signature, typed or printed name of registered agent a	nd title if applicable (NOTF: F	Registered Agent signature require	d when reinstating) DATE			
12. OFFICERS AND DIRECTORS			13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	P	☐ DELETE	1.1 TITLE		Change	☐ Addition	
NAME	PORBANDERWALA, MINAZ		1.2 NAME				
STREET ADDRESS	14775 SO. DIXIE HIGHWAY		1.3 STREET ADDRESS				
CITY-ST-ZIP	MIAMI FL 33176		1.4 CITY-ST-ZIP				
TITLE	S	☐ DELETE	2.1 TITLE		Change	☐ Addition	
NAME	HOODA, AMIR		2.2 NAME				
STREET ADDRESS	14775 SO. DIXIE HIGHWAY		2.3 STREET ADDRESS				
CITY-ST-ZIP	MIAMI FL 33176		2. 4 CITY-ST-ZIP				
TITLE	VP	☐ DELETE	3.1 TITLE		Change	☐ Addition	
NAME	ALLADIN, AMIN		3.2 NAME				
STREET ADDRESS	14775 SO. DIXIE HIGHWAY		3.3 STREET ADDRESS				
CITY-ST-ZIP	MIAMI FL 33176		3.4. CITY-ST-ZIP				
TITLE		☐ DELETE	4.1 TITLE		Change	☐ Addition	
NAME			4. 2 NAME			1	
STREET ADORESS			4.3 STREET ADDRESS				
CITY-ST-ZIP			4.4 CITY-ST-ZIP				
TITLE		☐ DELETE	5.1 TITLE		Change	☐ Addition	
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRESS				
CITY-ST-ZIP			5.4 CITY-ST-ZIP				
TITLE		☐ DELETE	6.1 TITLE		Change	☐ Addition	
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRESS				
CITY-ST-ZIP			6.4 CITY-ST-ZIP			j	

14. I 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 oath; that I am an officer or director of the concration 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 charged, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Amag 13006

CR2E034 (11/98)