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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT QF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # **P97000032178**1. Corporation Name

AMERICAN COMMERCIAL CLEANING INC.

## FILED Apr 30, 1999 8:00 am Secretary of State

04-30-1999 90098 035 \*\*\*150.00



Principal Place	of Business	Mailing Address			
	TER DRIVE. N.W.	1186 LAMPLIGHTER DRIVE, N.W.			
PALM BAY FL 3	32907	PALM BAY FL 32907			DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualifed
		I m. 44-9° - 4 July			04/08/1997  4. FEI Number — Applied For
<del>_</del>	ace of Business	2a. Mailing Address			
21		26			59-3438848 — Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired
22		27			
City & State		City & State			6. Election Campaign Financing \$5.00 May Be
23		28	C		Trust Fund Contribution Added to Fees
Zip	Country	Zip	- Count □	У	8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☐ No
24	25	29 3	0		Total Topolity Total
	9. Name and Address of Current	Registered Agent	-	1 Name	10. Name and Address of New Registered Agent
INFANTE, LUIS G			l°	I Name	
	LAMPLIGHTER DRIVE, N.W.		8	2 Street Ac	ddress (P.O. Box Number is Not Acceptable)
			L		
PALI	/I BAY FL 32907		8	3	•
			8	4 City	85 Zip Code
					FL   S   Z   S   S
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes	, the abo	ve-named co	orporation submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered
agent. I a	egistered agent, or both, in the state of m familiar with, and accept the obligation	ons of, Section 607.0505, Florid	la Statute	es.	audit's board of directors. Filereby accept the appointment as registered
SIGNATURE	Signature, typed or printed name of registered agent a	and title if applicable. (NOTE: Re	egistered Aç	ent signature requ	uired when reinstating) DATE
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	Р	☐ DELETÉ	1.1 TITLE		☐ Change ☐ Addition
NAME	PADILLA, CARLOS J		1.2 NAMI	.	
STREET ADDRESS	1186 LAMPLIGHTER DRIVE, N.W.	l.	1,3 STRE	ET ADDRESS	·
CITY-ST-ZIP	PALM BAY FL 32907		1.4 CITY	ST-ZIP	
TITLE	VP	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	CRUZ, JULIA S		2.2 NAMi	.	·
	1186 LAMPLIGHTER DRIVE, N.W	1		ET ADDRESS	
STREET ADDRESS	PALM BAY FL 32907	•	2.4 CITY	1	· ·
CITY-ST-ZIP		DELETE	3.1 TITLE		Change Addition
TITLE -	S ~		3.1 MAM	1	
NAME	PADILLA, OLGA I	•			
STREET ADDRESS	1186 LAMPLIGHTER DRIVE, N.W	•		ET ADDRESS	
CITY-ST-ZIP	PALM BAY FL 32907	DELETE	3,4, CITY 4,1 TITLE		☐ Change ☐ Addition
TIFLE	I INCANTE LING O	C) DETE IE			C storings C reduction
NAME.	INFANTE, LUIS G	•	4. 2 NAV		·
STREET ADDRESS	1186 LAMPLIGHTER DRIVE, N.W.	·		ET ADDRESS	
CITY-ST-ZIP	PALM BAY FL 32907		4.4 CITY		[] Ch [11] Addition
TITLE	D	☐ DELETE	5.1 TITLE	- 1	☐ Change ☐ Addition
NAME	INFANTE, MARIA E		5.2 NAM		•
STREET ADDRESS	1186 LAMPLIGHTER DRIVE, N.W	1.	5.3 STRE	ET ADDRESS	
CITY-ST-ZIP	PALM BAY FL 32907		5.4 CITY		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAM		
STREET ADDRESS			6.3 STRE	ET ADDRESS	
			64 CITY	.ST. 7IP	

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 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, with all other like empowered.

**SIGNATURE:** 

4-28-99