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

PRQFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham ~

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000057836 (3)

SPRINGS CLEANERS OF LAKE MARY, INC.

Principal Place of Business

Mailing Address

## FILED May 06 1998 8:00am Secretary of State



4185 W. LAKE MARY BLVD. LAKE MARY FL 32746		-LAKE MARY FL 32746-		DO NOT WRITE IN THI	S <b>S</b> PACE	
				3. Date Incorporated or Qualified 07/01/1997		
2. Principal P	lace of Business	2a. Mailing Address	_	4. FEI Number	Α	pplied For
21		26 362 CROTON DRIVE		59-3466866	N	ot Applicable
Suite, Apt. #, etc.		Suita, Apt. #, etc.		5. Certificate of Status Desired	•	Additional
22		27		G. Obrimode of Status Dosined		equired
City & State		City & State  28 MA ITUAN	FL	6. Election Campaign Financing Trust Fund Contribution		May Be to Fees
Zip 24	Country 25		Country D USA	<ol> <li>This corporation owes or has paid the operation of the personal Property Tax due June 30.</li> </ol>	Yes [	tangible No
	9. Name and Address of Curren	l Registered Agent		10. Name and Address of New Registers		
-95	HUO, ALEEN-		81 Name	HUCK Schmalmaack		ļ
-43	SARIBOEWOOD AVE.		82 Street Add	dress (P.O. Box Number is Not Acceptable)		
-DA	YT <b>QN</b> A BEACH FL 82115			2 CROTON DAVE		
			83			-
			84 City	AITLAND F	L 85 Zip	Code 75/
11. Pursuant	to the provisions of Sections 607.050.	2 and 607.1508, Florida Statutes	, the above-named co	rporation 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 Askigations of Section 607.0505, Florida Statutes.						
SIGNATURE	Much /bl	maker auch		4/261	78	
	Slonkako, typed or printed name of regionard age		Registered Agent signature req			· · · · · · · · · · · · · · · · · · ·
12.	OFFICERS AND	DELETE	13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTOR  Change	RS IN 12
TITLE	PRESIDENT		1.1 TITLE		☐ Cusuße	Li Adolidon
NAME	CHARLES SCHMAL 362 CRUTON DRI	υ 1-144 C <b>μ</b> _ - υ <b>-</b>	1.2 NAME			
STREET ADDRESS	SGA CRETOR DA	2270	1.3 STREET ADDRESS			[
CITY-ST-ZIP	MAITLYND, FL VILE PRESIDENT	- DELETE	1.4 DITY - ST - ZIP 2.1 TITLE		Change	Addition
TITLE					□ Olizinge	- Addition
NAME	JOSE LIAMA 4262 SANDHUK	ST DRIVE	22 NAME			
STREET ADDRESS	9262 377011	2.017	2 3 STREET ADDRESS			ŀ
CITY-ST-ZIP TITLE	ORLANDO, FL 3 SECRETAMY TACKIE SCHMA	□ DELETE	2.4 CITY-ST-ZIP 3.1 TITLE		Change	Addition
NAME	SECRETARY	I MAACE	32 NAME			
STREET ADDRESS	9     1	N 4	33 STREET ADDRESS			
	MATT	32761	3.4. CITY+ST+ZIP			
CITY-ST-ZIP TITLE	MAITLAND, FO	DELETE	4.1 TITLE		Change	Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			44 CITY-SI-ZIP			
TITLE		DELETE	51 TITLE		Change	Addition
NAME		_	5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 City-St-ZiP			
TITLE		DELETE	61 TITLE		☐ Change	Addition
NAME	•	_	62 NAME		,	
STREET ADDRESS			63 STREET ADDRESS			
			6.4 City-St-ZiP			
CITY-ST-ZIP	atifuthal the information complied w	th this filing dose not qualify for		in Section 119 07/3Vi) Florida Statutes I further	certify that the	a information

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 13 if chapters, or on an attachment with an address.

\*\*Example 1.1.\*\*

\*\*Chapter 607\*\*

\*\*Example 2.1.\*\*

\*\*Example 3.1.\*\*

\*\*Example 3.1.\*

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