SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9700081936 (1)

TIFFANY'S CLEANING SERVICE, INC.

Principal Place of Business

2221 NE 164TH ST., STE. 328 N. MIAMI BEACH FL 33160

2. Principal Place of Business

Suite, Apt. #, etc.

Malling Address

2a. Mailing Address

Sulte, Apt. #, etc.

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2221 NE 164TH ST., STE, 328 N. MIAMI BEACH FL 33160

FILED Sep 09 1998 8:00am Secretary of State



Applied For

\$8.75 Additional

Fee Required

Not Applicable

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/22/1997

5. Certificate of Status Desired

4. FEI Number

22				21					
23	City & State			<u>⊢</u> –	City & State				5.00 May Be Added to Fees
	Zip		Country	Zip		Count	try	8. This corporation owes or has paid the current y	ear Intangible
24			25	29	3	10		Personal Property Tax due June 30.	s No
9. Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent			
MURPHY, PATRICK J							Name	Davilo Pouce	
1401 E. BROWARD BLVD., STE. 201						82 Street Address (P.O. Box Number is Not Acceptable)			
FT. LAU DE RDALE FL 33301						70861 NW 3 CI			
						8	13		
						E	4 City	. 85	Zip Code
		_						published FLI"	33024
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.									
SIGNATURE									
Signature, type or printed name of agristered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)									DECTORS IN 42
12.		DP	DEFICERS	AND DIRECTOR		13.		ADDITIONS/CHANGES TO OFFICERS AND DI	
TITLE			DANILO R		DELETE			 , 0	Change
NAME				20		1.2 NAM			
	REET ADDRESS 2221 NE 164TH ST., STE. 328 N. MIAMI BEACH FL 33160						ET ADDRESS		
	ST-ZIP	VT	DEACH FL 33100		()	1.4 CITY 2.1 TITLI			
TITLE			ERO, NORMA] DELETE	2.1 111L		<u></u>	Change L Addition
NAME			164TH ST., STE. 3	29		1	ET ADDRESS		
	ET ADDRESS		BEACH FL 33160	20		2.4 CITY	i i		
TITLE	ST-ZIP	14. WHEN	DENOTITE CO TOO		DELETE	3.1 TITLE			Change Addition
NAME					OCCUPE	3.2 NAM			Thomas Thomas
	ET ADDRESS					1	ET ADDRESS	v v	į
	ST-ZIP					3.4 CITY			
TITLE					DELETE	4.1 TITLE			Change Addition
NAME						4.2 NAM	E	-	
	ET ADDRESS					4.3 STRE	ET ADDRESS		
	ST-ZIP					4.4 CITY	-ST-ZIP		
TITLE					DELETE	5.1 TITL	E		hange Addition
NAME	.				- -	5.2 NAM	E		
STRE	ET ADDRESS					5.3 STR	ET ADDRESS		
CITY-	ST-ZIP					5.4 CITY	-ST-ZIP		
TITLE			, <u> </u>		DELETE	6 1 TITL	E		hange 🔲 Addition
NAME	:					6.2 NAM	E		
STRE	ETADORESS					6.3 STRE	ET ADDRESS		
CITY-	ST-ZIP					6.4 CITY			
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 chapter 6, or on an attachment with an address.									