## 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 Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90074 010 \*\*\*150.00

DOCUMENT # P98000  1. Corporation Name ELEGANCE CLEANERS, INC.	028615	
Principal Place of Business	Mailing Address	1 (801/80) ind ison ) buil abili obju osin solid libet love nen ges ida

Principal Place	rincipal Place of Business Mailing Address											
1894 PARENTAL HOME RD			1894 PARENTAL HOME RD									
JACKSONVILLE	FL 32216	JACKSONVILL	E FL JZZIO				DO NO	T WRITE IN THIS	SPACE			
						3. Date I	ocorporated or Qu	ıalifed				
						04/0	1/1998					
2. Principal P	lace of Business	2a. Mailing A	ddress			4. FEI N		, <u></u>	Apı	lied For		
21		26				<u> 59</u>	<u>350032</u>	<u> </u>		Applicable		
Suite, Act.	#, etc.	Suite, Ap	Suite, Apt. #, etc.			5. Certifo	ate of Status Des	ired 🗆	\$8.75 Additional Fee Required			
	City & State City & State					6. Electic	n Campaign Fina	ncing	\$5.00	/lay Be		
23		28				Trust I	und Contribution		Added to	Fees		
Zip	Cour try	Zip		Country			•	ne current year int		٦.,		
24		29		30			rial Property Tax.	N		□№		
ļ	9. Name and Address of	of Current Registered Age	ent	81	Name	10. Name	and Address of	New Registere d	Agent			
D/ VI	TON, LEONARD M			*'	Name							
	' TOLKIEN LANE			82	Street Add	ress (P.O. Bo	Number is Not A	(cceptable)				
	KSONVILLE FL 32225			83		_						
dr.o.	1001111000 1 0 00000			93								
				84	City			FL	85 Zip C			
11. Pursuant	to the provisions of Sections registered agent, or both, in t	607.0502 and 607.1508, F	lorida Statut	es, the above	-named cor	poration subm	is this statement	for the purpose of	changing its a	egistered istered		
office or r agent. I a	registered agent, or both, in t im familiar with, and accept t	ne State († Flonda, Such d he obligations of, Section 6	nange was a 607.0505, FIb	rida Statutes.	are corporat	IOITS DOGITU OF	(Meclors, Thereby	accept the appoint	minent go rog			
SIGNATURE												
0.010(1)(1)	Signature, typed or printed name of re-	<del> </del>	(NOT	<u> </u>	signature requir	ed when reinstating		DATE	ID DIDECTOI	10.10.40	8	
12.	, OFFIC	CERS AND DIRECTORS	T DC: ETC	13	17>	ADDITI	ONS/CHANGES	TO OFFICERS M	Change	Addition	Ĕ	
TITLE	]	L	DELETE	1.1 TITLE			. Payton		Change	[2] . 100110011	CR2E034 (11/98)	
NAME	•			1 2 NAME	LA	O'T Tol	Kienla	n <b>t</b>			8	
STREET ADDRESS				13 STREET	11.	10 K600 K	ille, FL	32225		ļ	2	
CITY-ST-ZIP			DELETE	14 CITY-ST	-ZIP V				Change	Addition	R	
TITLE		L	_ DELETE	2.1 TITLE 2.2 NAME	Y	ida Day	ton			J, 130111371		
NAME				2.3 STREET	ADDDECC AL	ida Payton 07 TolkienLank						
STREET ADDRESS				2.4 CITY-S	ADDRESS II	ckenni	ille FL	32225				
CTY-ST-ZIP			DELETE	2.4 CHY-S 3.1 TITLE	1-ZIP 130	CAUIV	100 , 10		Change	Addition		
TITLE		L		3.2 NAME								
NAME				3.3 STREET	ADDRESS							
STREET ADDRESS					İ							
CITY-ST-ZIP TITLE			DELETE	34 CITY-S	1-215				Change	Addition		
		•		4, 2 NAME	l				_	ļ		
NAME				43 STREET	ADDESC							
STREET ADDRESS												
TITLE			DELETE	4.4 CITY-ST 5.1 TITLE	-711.				Change	Addition		
1		Ĺ		5.2 NAME					-			
NAME				5.3 STREET	ADDRESS							
STREET ADDRESS				5.4 CITY-ST	1					Ì		
CITY-ST-ZIP			DELETE	6.1 TITLE		_			Change	Addition		
TITLE		·		6.2 NAME						_		
NAME				63 STREET	ADDRESS							
STREET ADDRESS	il .			V 3 V NCL.								

6.4 CITY-ST-ZIP CITY-ST-ZIP 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: <u>入</u>

(9(4)723-6059