

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
Mar 02, 1999 8:00 am
Secretary of State

03-02-1999 90119 021 ***150.00

DOCUMENT # P98000032514

1. Corporation Name

SUPERIOR ONE PRICE CLEANERS, INC.

Principal Place of Business

3357 WEST HILLSBORO BLVD
DEERFIELD BEACH FL 33442

Mailing Address

3357 WEST HILLSBORO BLVD
DEERFIELD BEACH FL 33442

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/09/1998

4. FEI Number

65-0843323

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

Yes No

2. Principal Place of Business

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

9. Name and Address of Current Registered Agent

PERNA, HELEN
3357 WEST HILLSBORO BLVD
DEERFIELD BEACH FL 33442

10. Name and Address of New Registered Agent

81 Name

GREGG MOROSINI

82 Street Address (P.O. Box Number is Not Acceptable)

8455 W. OAKLAND PK BLVD

83

84 City

SUNRISE

FL

85 Zip Code

33351

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

Gregg Morosini

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

1.1 TITLE ☒ DELETE

NAME
PERNA, HELEN
STREET ADDRESS
3357 WEST HILLSBORO BLVD
CITY-ST-ZIP
DEERFIELD BEACH FL 33442

1.2 TITLE ☐ DELETE

NAME
PRES
STREET ADDRESS
CITY-ST-ZIP

1.3 TITLE ☐ DELETE

NAME
VP
STREET ADDRESS
SCOTT MOROSINI
8810 NW 77TH CT APT 1
CITY-ST-ZIP

1.4 TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

1.5 TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

1.6 TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

NAME
PRES
STREET ADDRESS
GREGG MOROSINI
8455 W OAKLAND PK BLVD
CITY-ST-ZIP
SUNRISE, FL 33351

1.2 TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

1.3 TITLE ☒ Change ☐ Addition

NAME
VP
STREET ADDRESS
SCOTT MOROSINI
8810 NW 77TH CT APT 164
CITY-ST-ZIP
TAMARAC FL 33321

1.4 TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

1.5 TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

1.6 TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
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:

Gregg Morosini
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)