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

P98000074173 DOCUMENT

1. Corporation Name

MIRAGE DRY-CLEANERS INC.

Principal Place of Business	Mailing Address
1242 OCEAN REEF ROAD	1242 OCEAN REEF ROAD
WESLEY CHAPEL FL 33543	WESLEY CHAPEL FL 33543

FILED Mar 01, 1999 8:00 am Secretary of State

03-01-1999 90096 003 ***150.00



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 08/24/1998 2a. Mailing Address FEI Number Applied For 2. Principal Place of Business Not Applicable 21 26 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certifcate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00_May_Be Trust Fund Contribution Added to Fees 23 28 Country 8. This corporation owes the current year Intangible Country Zip Zip Personal Property Tax. ☐ Yes 30 25 24 29 g. Name and Address of Current Registered Agent Name and Address of New Registered Agent 81 Name COMIN. ROBERTO Street Address (P.O. Box Number is Not Acceptable) 82 1242 OCEAN REEF ROAD WESLEY CHAPEL FL 33543 83 Zip Code 84 85 City 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 12. DELETE ☐ Change 1.1 TITLE TITLE GONZALEZ, MARIELA 1.2 NAME NAME 1242 OCEAN REEF ROAD STREET ADDRESS 1.3 STREET ADDRESS **WESLEY CHAPEL FL 33543** CITY-ST-ZIP 1.4 CITY-ST-ZIP ☐ DELETE Change Addition STD 2.1 TITLE TITLE COMIN. ROBERTO 2.2 NAME NAME 1242 OCEAN REEF ROAD 2.3 STREET ADDRESS STREET ADDRESS **WESLEY CHAPEL FL 33543** 2.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change DELETE 3.1 TITLE TITLE PAZ, CHRISTIAN 3.2 NAME NAME 1242 OCEAN REEF ROAD 3.3 STREET ADDRESS STREET ADDRESS WESLEY CHAPEL FL 33543 3.4. CITY-ST-ZIP CITY-ST-ZIP □ DELETE Addition 41 TITLE PAZ. GIANCARLO 4. 2 NAME NAME 1242 OCEAN REEF ROAD 4.3 STREET ADDRESS STREET ADDRESS **WESLEY CHAPEL FL 33543** 4.4 CITY-ST-ZIP CITY-ST-ZIP Addition TT DELETE Change 5.1 TITLE TITLE 52 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIF 6.1 TITLE Change ☐ Addition ☐ DELETE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS 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 of the receiver of 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.) Block 12 or Block 13 if changed, or on

6.4 CITY-ST-ZIP

SIGNATURE:

CR2E034 (11/98)