

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 20 1997 8:00am
Secretary of State

DOCUMENT # S01470

1. Corporation name

Ocean Cleaners of Neptune Beach, Inc.

Principal Place of Business

Mailing Address

same as place
of business

Tradewinds Plaza Shopping Center#1
1505 Atlantic Blvd.
Neptune Beach, FL 32233

2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified
09/19/1990

3a. Date of Last Report
05/01/96

4. FEI Number
59-3040718

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 has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

21. Suite, Apt. #, etc.

26. Suite, Apt. #, etc.

22. City & State

27. City & State

23. Zip Country

28. Zip Country

24. Zip Country

29. Zip Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Sieng, Sophan
5134 Hickson Road
Jacksonville, FL 32207

81. Name

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

83.

84. City

FL

85. Zip Code

11. I, the undersigned, being one of the officers or directors of the above-named corporation, submit this statement for the purpose of changing its registered office as set forth in Section 607.0502 and 607.1508, Florida Statutes. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and certify that I am acceptable to the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

Sophan SIENG

(NOTE: Registered Agent signature required when translating)

3-14-97

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

101. ☐ DELETE

11. TITLE ☐ Change ☐ Addition

NAME

12. NAME

5134 Hickson Rd.

13. STREET ADDRESS

JACKSONVILLE, FL. 32207

14. CITY, ST, ZIP

Vice President & Director ☐ DELETE

21. TITLE ☐ Change ☐ Addition

NAME

22. NAME

Ashley Sieng

23. STREET ADDRESS

10070 Russell Sampson Rd.

24. CITY, ST, ZIP

JACKSONVILLE, FL. 32259

31. TITLE ☐ Change ☐ Addition

Secretary-Treasurer & Director ☐ DELETE

32. NAME

Sophan Sieng

33. STREET ADDRESS

5134 Hickson Rd.

34. CITY, ST, ZIP

JACKSONVILLE, FL. 32207

41. TITLE ☐ Change ☐ Addition

☐ DELETE

42. NAME

☐ DELETE

43. STREET ADDRESS

☐ DELETE

44. CITY, ST, ZIP

☐ DELETE

51. TITLE ☐ Change ☐ Addition

☐ DELETE

52. NAME

☐ DELETE

53. STREET ADDRESS

☐ DELETE

54. CITY, ST, ZIP

☐ DELETE

55. TITLE ☐ Change ☐ Addition

☐ DELETE

56. NAME

☐ DELETE

57. STREET ADDRESS

☐ DELETE

58. CITY, ST, ZIP

☐ DELETE

59. TITLE ☐ Change ☐ Addition

☐ DELETE

60. NAME

☐ DELETE

61. STREET ADDRESS

☐ DELETE

62. CITY, ST, ZIP

☐ DELETE

14. I, the undersigned, 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 is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am acceptable to the obligations of the corporation or that I have been authorized to execute this report as required by Chapter 607, Florida Statutes, and that my name appears on Block 13 or on an attachment with an address.

SIGNATURE:

Sophan SIENG
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-14-97 (904) 249-2772

CR2E034 (9/96)