PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # V06623

KORETIZING CLEANERS, INC.

									1 312 11 1 31 1
Principal Place of Business Mailing Address								,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
1438 W EDGEWOOD AVE									
JACKSONVILLE	. FL 32208	JACKSONVILLE FL 32208				DO NOT WRITE IN T	HIS SPACE		
						3. Date Incorporated or Qualifed			
•						01/13/1992			
_ `	lace of Business	2a. Mailing Address				4. FEI Number			ed For
21		26				59-3099402		L	pplicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certifcate of Status Desired		5 Add e Requ	
City & Stat	е	City & State				6. Election Campaign Financing		00 ма	
23 Zin	3 28 Zip Country Zip					Trust Fund Contribution		led to F	ees
24	Country Zip Country 25 29 30			, y	ļ	This corporation owes the current year Personal Property Tax.	Intangible Yes	Г	lNo
	9. Name and Address of Curre	11	30)			10. Name and Address of New Register			
			8	1 1	Name				
PATEL, JYOTINDRA K.				2 :	Stroot Addros	ss (P.O. Box Number is Not Acceptable)			
1438 WEST EDGEWOOD AVE				٠	Street Addres	ss (F.O. box Number is Not Acceptable)			,
JAU	KSONVILLE FL 32208		8	3					
			8	4 (City		85 2	Zip Coc	le
11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes				Ve-n	named cornor	ration submits this statement for the nurnos	of changing	ite rec	ristered
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.									ered
•	m familiar with, and accept the obliga	mons of, Section 607.0505, Flori	ica Statute	s.					
SIGNATURE .	Signature, typed or printed name of registered age	nt and title if applicable. (NOTE:	Registered Ag	ent si	ignature required w	when reinstating) DATE			— i
12.	OFFICERS AND DIRECTORS		13.			ADDITIONS/CHANGES TO OFFICERS	AND DIREC	CTORS	IN 12
TITLE			1.1 TITLE				Chan	ige	Addition
NAME	•		1.2 NAME						
STREET ADDRESS	10332 NAKEMA DR W		1.3 STRE	1.3 STREET ADDRESS					
CITY-ST-ZIP			1.4 CITY-	ST-Z	OP P				
TITLE	VS	☐ DELETE 2.1 T		2.1 TITLE			☐ Chan	ge	☐ Addition
NAME	PATEL, NALINI R. 22N		2.2 NAME	į					
STREET ADDRESS			2.3 STRE	ET AD	DORESS				Í
CITY-ST-ZIP	JACKSONVILLE FL 32257		2. 4 CITY-	ST-Z	ZIP				
TITLE			3.1 TITLE				☐ Chan	ge ſ	Addition
NAME	•		3.2 NAME						
STREET ADDRESS			3.3 STREI	ET AD	DORESS				
CITY-ST-ZIP	34.		3.4. CITY-	3.4. CITY-ST-ZIP					
TITLE			4.1 TITLE				Chan	ge I	Addition
NAME			4. 2 NAME	1					i
STREET ADDRESS			4.3 STREE	ET AD	DRESS				Ì
CITY-ST-ZIP				4.4 CITY-ST-ZIP					
TITLE	P	☐ DELETE	5.1 TITLE	J, <u>L</u>			Chang	ge I	Addition
NAME			5.2 NAME						_ ''
STREET ADDRESS			5.3 STREE		DORESS				1
CITY-ST-ZIP			5.4 CITY-1						1
TITLE		□ nei ete	6.1 TITLE	· <u></u> .	·		Chang	1 00	Addition

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.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

NAME

STREET ADDRESS

FILED

Jan 23, 1999 8:00am

Secretary of State

01-23-1999 90055 006 ***150.00