Apr 26, 1999 8:00 am Secretary of State

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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

DOCUMENT # V14393

1. Corporation Name

TRU-LOOK CARPET & UPHOLSTERY CLEANING, INC.

Principal P ace of Business Mailing Address							i chibit direct ciant arang con	# 18188 titt #1811 #	idit didii didii	didit didit idai
522 NE 33RD STREET FT. LAUDERDALE FL 33334 US			522 NE 33RD STREET FT. LAUDERDALE FL 33334 US				L	RITE IN THIS	SPACE	·
							3. Date Incorporated or Qualif 02/17/1992	ed		
9 Dissipal DI	and of Business		lina Addrage				4. FEI Number		T A	pr lied For
	ace of Business	\vdash	2a. Mailing Address				65-0311448		<u> </u>	ot Applicable
Suite, Apt. i	# otc		Suite, Apt. #, etc.							A iditional
22		27	-				5. Certificate of Status Desired			
City & State		28	28				6. Election Campaign Financing S5.00 May Be Trust Fund Contribution Added to Fees			
Zip			Zìp Cour				8. This corporation owes the o	current year int	angible Yes	XINo
24	25		29 30				Persor al Property Tax. Li Yes JAJ No 10. Name and Address of New Registers d Agent			
	9. Name and Address	of Current Registere	d Agent	8	41		10. Name and Address of Ne	w Registered	Agent	
Mana	NICK, IRIS			0	"	Name				
	NE 58 ST				2	Street Ac dre	ss (P.O. Box Number is Not Acco	eptable)		
	AUDERDALE FL 33308				83					ì
FIL	MODERDALE PE 33300			8	3					
				ļ	- (City		FL	• .	Code
11. Pursuant office or reagent.	to the provisions of Scctio egistered agent, or bo h, in m familiar with, and accept	ns 607.0502 and 607.1 n the State of Florida. S tyline obligations of, Sec	508, Florida Statu uch change was stion 607.0505, Fl	authorized borida Statute	ove-r by th es.	named ccrpo ne corporation	ration submits this statement for a's board of (lirectors, I hereby ac	4/21/	intment as r	egistered egistered
SIGNATORE	Signature, typed or printed na ne of	registered agent and title if appli	cable. (NOT	:: Registered Ag	ent s	signature required		DATE		
12.		ICERS AND DIRECTO		13.			ADDITIONS/CHANGES TO	OFFICERS / L		OF S IN 12 Addition
TITLE	P		☐ DELETE	1,1 TITLE	Ε				Change	[Addition
NAME	MULNICK, IRIS			1.2 NAMI	E	Ì				1
STREET ADDRESS					EET A	DDRESS				
CITY-ST-ZIP	FT LAUDERDALE FL	33308		14 CITY		ZIP			Change	Addition
TITLE			☐ DELETE	2.1 TITLE		1			Change	Magnou
NAME				2.2 NAMi	E					
STREET ADDRE 3S				2.3 STRE	ETA	DDRESS				
CITY-ST-ZIP				2. 4 CITY		ZIP			Change	Addition
TITLE			☐ DELETE	3.1 TITLE					☐ Criange	L] Addition
NAME				3.2 NAM						
STREET ADDRESS				33 STRE						
CITY-ST-ZIP				3.4. CITY		ZIP			☐ Change	Addition
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TITLE			☐ DELETE						□ cuange	
NAME				6.2 NAM		POPECC)
STREET ADDRESS						DDRESS				.
CITY-ST-ZIP				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:

SIGNATURE AND TYPES OR REINTE