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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

V46837

(3)

FERNANDINA CLEANERS, INC.

FILED Mar 26 1998 8:00am Secretary of State

	,			
Principal Place of Business	Mailing Address			1944 9 1811 01811 01811 01811 1001
832 S. BTH STREET	832 S. 8TH ST			
FERNANDINA BEACH FL 32034	FERNANDINA BEACH FL	32034	DO NOT MIDITE IN THE	10 0D40E
	U\$		DO NOT WRITE IN TH 3. Date Incorporated or Qualified	IS SPACE
			· '	
2. Principal Place of Business	2a. Mailing Address		06/23/1992 4. FEI Number	Applied For
21	26		59-3132846	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	•		\$8.75 Additional
22	27		6. Certificate of Status Desired	Fee Required
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23	28		Trust Fund Contribution	Added to Fees
Zip Count	ry Zip	Country	8. This corporation owes or has paid the	_ · _ ·
24 25	29	30]	Personal Property Tax due June 30.	Yes No
·····	ess of Current Registered Agent	81 Name	10. Name and Address of New Registers	Agent
PETERS, JOHN L.		- A Name		
832 S. 8TH STREET		82 Street Add	ress (P.O. Box Number is Not Acceptable)	
Fernandina Beach F	L 32034	83		
		65		
		84 City		85 Zip Code
dd Dwe ent to the provisions of Cor	Figure 607 0100 and 607 1509 Florido Platid	too the about period per	-	
office or registered agent, or bot	h, in the State of Florida, Such change was	authorized by the corpora	poration submits this statement for the purpose tion's board of directors. I hereby accept the a	ppointment as registered
agent. I am familiar with, and acc	cept the obligations of, Section 607.0505, FI	orida Statutes.		
SIGNATURE	e of registered agent and little if applicable. (NOT	E: Registered Agent signature requi	ired when reinslating) DATE	
	DIFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE P	DELETE	1.1 TITLE		Change Addition
NAME PETERS, JOHN		1.2 NAME		
STREET ADDRESS 832 S. 8TH ST		1.3 STREET ADDRESS		
CITY-ST-ZIP FERNANDINA BE	ACH FL	1.4 CITY - ST - ZIP		
TITLE	☐ DELE T E	2.1 TITLE		Change Addition
NAME		2.2 NAME		
STREET ADDRESS		2.3 STREET ADDRESS		
CITY-S1-ZIP		2. 4 CITY - ST - ZIP		,
TITLE	☐ DELE TE	3.1 TITLE		☐ Change ☐ Addition
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-ST-ZIP		3.4. CITY - ST - ZIP		
TITLE	DELETE	4.1 TITLE		Change Addition
NAME		4. 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY - ST - ZIP		
THILE	☐ DELETE	5.1 TITLE		Change Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP	The reserve	5.4 CITY - ST - ZIP		Change Addition
TITLE	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME	ı	
STREET ADDRESS		6.3 STREET ADDRESS		ļ
CITY-ST-ZIP	Production of the second secon	6.4 CITY - ST - ZIP	0-6-40 07/0V/) 5)-6-1- 0-1-4-1-1/	

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.

1-11-989411 25