

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1996.
AMOUNT DUE ON OR BEFORE 8/9/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

**PROFIT
CORPORATION
ANNUAL REPORT
1995**



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
 95 JUN 30 AM 9:45

DOCUMENT # P93000078028 (6)

1. Corporation Name

**THE FRENCH CONNECTION DRY CLEANING AND LAUNDRY I
NC.**

Principal Place of Business

**3080 N.E. 12TH TERRACE
POMPANO BEACH FL 33064**

Mailing Address

**3080 N.E. 12TH TERRACE
POMPANO BEACH FL 33064**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/10/1993

3a. Date of Last Report

04/15/1994

4. FEI Number

65-0453488

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**

7. This corporation has liability for extraordinary fees under s. 1003.01(2)
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21

2a. Mailing Address

26

Suite, Apt. #, etc

Suite, Apt. #, etc

22. City & State

27. City & State

23. Zip

28. Zip

Country

29. Country

24. Country

30. Country

9. Name and Address of Current Registered Agent

**ROGERS, ROBERT D
3080 N.E. 12TH TERRACE
POMPANO BEACH FL 33064**

10. Name and Address of New Registered Agent

81. Name

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

83. City

84. City

FL

85. Zip Code

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

Signature of (current) name of registered agent and the corporation

Signature of (new) name of registered agent and the corporation

(SAR)

12. OFFICERS AND DIRECTORS

TITLE

D

NAME

ROGERS, ROBERT D

STREET ADDRESS

3080 N.E. 12TH TERRACE

CITY, ST, ZIP

POMPANO BEACH FL 33064

TITLE

D

NAME

ROGERS, PAMELA

STREET ADDRESS

3080 N.E. 12TH TERRACE

CITY, ST, ZIP

POMPANO BEACH FL 33064

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE

12. NAME

13. STREET ADDRESS

14. CITY, ST, ZIP

2. TITLE

22. NAME

23. STREET ADDRESS

24. CITY, ST, ZIP

3. TITLE

32. NAME

33. STREET ADDRESS

34. CITY, ST, ZIP

4. TITLE

42. NAME

43. STREET ADDRESS

44. CITY, ST, ZIP

5. TITLE

52. NAME

53. STREET ADDRESS

54. CITY, ST, ZIP

6. TITLE

62. NAME

63. STREET ADDRESS

64. CITY, ST, ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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.

SIGNATURE:

Pamela Rogers

SIGNATURE AND TYPED OR PRINTED NAME OF OFFICER OR DIRECTOR

6-27-95

305-791-6030