


FILE NOW: FILING FEE AFTER MAY-1 IS \$550.00 1080.00

PROFIT CORPORATION ANNUAL REPORT 1997



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

FILED  
97 AUG 11 AM 10:39  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # 794000079830  
1. Corporation Name  
The Rite Price Cleaner, Inc.

Principal Place of Business Mailing Address  
7431 W. Atlantic Ave. Same  
Delray Beach, FL 33446

**REINSTATEMENT** 915917

2. Principal Place of Business 2a. Mailing Address  
21 7431 W. Atlantic Ave. 26 Same  
Suite Apt #, etc Suite Apt #, etc  
22  
City & State 27  
23 Delray Beach, Florida 28  
City & State  
Zip Country 29  
24 33446 25 USA 30

3. Date Incorporated or Qualified 3a. Date of Reinstatement  
10-31-94  
4. FEI Number Applied for  
05-0541626 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

9. Name and Address of Current Registered Agent  
Eli Levy  
~~9873 Lawrence Rd~~  
~~Boynton Beach, Florida 33436~~  
13584 Weyburne Drive  
Delray Beach FL 33446

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
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 Eli Levy ELI LEVY Eli Levy 8/8/97  
(NOTE: Registered Agent signature is required when reinstating.)

12. OFFICERS AND DIRECTORS

TITLE	<u>President</u>	<input type="checkbox"/> DELETE
NAME	<u>Eli Levy</u>	
STREET ADDRESS	<u>9873 Lawrence Rd.</u>	
CITY-ST-ZIP	<u>Boynton Beach, Florida 33436</u>	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS (IL 12)

11 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME		
13 STREET ADDRESS	<u>800002264498--5</u>	
14 CITY-ST-ZIP	<u>-08/12/97--01050--004</u>	
21 TITLE	<u>***1088.75</u>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME		
23 STREET ADDRESS		
24 CITY-ST-ZIP		
31 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME		
33 STREET ADDRESS		
34 CITY-ST-ZIP		
41 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME		
43 STREET ADDRESS		
44 CITY-ST-ZIP		
51 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME		
53 STREET ADDRESS		
54 CITY-ST-ZIP		
61 TITLE		
62 NAME		
63 STREET ADDRESS		
64 CITY-ST-ZIP		



14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b) Florida Statutes. Further, I 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 I were the 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 by report) or on an attachment with an address.

SIGNATURE: Eli Levy 4-28-97 561-499-7100

CR2E034 (9-96)