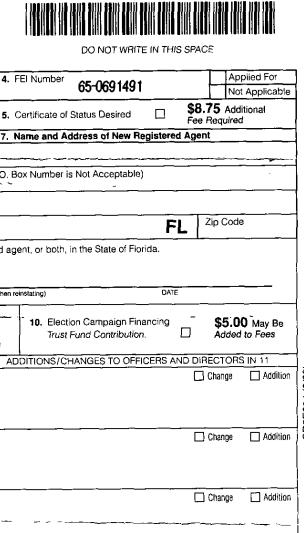
2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P96000064192 ALR CLEANING SERVICES, INC. Mailing Address Principal Place of Business 1626 N.W. 1ST STREET N.W. 1ST STREET MIAMI FL 33125-5533 FL 33125 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. City & State 4. FEI Number City & State Zip Country Zip Country 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent Name RAVELO, FRANCISCO Street Address (P.O. Box Number is Not Acceptable) 1626 NW 1ST ST #5 MIAMI FL 33125 City 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable FILE:NOW!!!:FEE IS-\$150:00~ --9. This corporation is eligible to satisfy its Intangible After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 11. TITLE ☐ Delete TITLE RAVELO, FRANCISCO NAME NAME STREET ADDRESS STREET ADDRESS 1626 N.W. 1ST ST. #5 CITY-ST-ZIP CITY-ST-ZIP MIAMI FL TITLE ☐ Delete TITLE

FILED Apr 22, 2000 8:00 am Secretary of State

04-22-2000 90026 001 ***150.00



13. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with an other like empowered.

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SIGNATURE:

RAVELO, ANA L

MIAMI FL

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