

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 398314 (5)

1. Corporation Name

PETROWER CLEANING SERVICE, INC



Principal Place of Business

Mailing Address

C/O IRVING PALONSKY
2110 N. 53RD AVENUE
HOLLYWOOD FL 33021

C/O IRVING PALONSKY
2110 N. 53RD AVENUE
HOLLYWOOD FL 33021

3. Date Incorporated or Qualified

03/29/1972

3a. Date of Last Report

02/21/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc

Suite, Apt. #, etc

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PALONSKY, IRVING
2110 N. 53RD AVENUE
HOLLYWOOD FL 33021

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

Signature typed or printed name of registered agent and the filer (if filer is not the registered agent)

Signature of Registered Agent (signature required when not filer)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

PD
PALONSKY, IRVING
2110 N. 53RD AVENUE
HOLLYWOOD FL

DELETE

1. TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

SD
PALONSKY, FAYE
2110 N. 53RD AVENUE
HOLLYWOOD FL

DELETE

1. TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

T
PALONSKY, IRVING
2110 N. 53RD AVENUE
HOLLYWOOD FL

DELETE

1. TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

DELETE

1. TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

DELETE

1. TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

DELETE

1. TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

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 119.07(3)(k), 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: Irving Palonsky IRVING PALONSKY

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-25-96 (305) 963-6340

Date Daytime Phone

CR2E034 (12/95)