

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

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # ~~380410~~ 452194
1. Corporation Name
SWIFT CLEANERS & LAUNDRY, INC.
AND

FILED
97 APR -1 PM 2:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address
1526 SOUTH FEDERAL HIGHWAY **SAME**
DELRAY BEACH, FL 33483

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 1974	3a. Date of Last Report 1996
21 1526 SOUTH FEDERAL HWY	26 SAME	4. FEI Number 59-1534976		Applied For Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
22	27	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	
City & State DELRAY BEACH, FL		City & State			
24 33483	25 USA	29	30		
Zip Country		Zip Country			

9. Name and Address of Current Registered Agent

V. JAMES ROSCIGNO
1526 SOUTH FEDERAL HIGHWAY
DELRAY BEACH, FL 33483

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

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

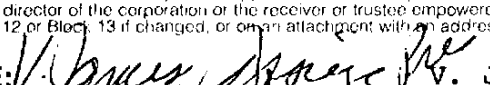
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent's signature required when reissuing)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	☐ Change ☐ Addition
NAME	V. JAMES ROSCIGNO	1.2 NAME	
STREET ADDRESS	1526 SOUTH FEDERAL HWY.	1.3 STREET ADDRESS	
CITY-ST-ZIP	DELRAY BEACH, FL 33483	1.4 CITY-ST-ZIP	
TITLE	VP/S	2.1 TITLE	☐ Change ☐ Addition
NAME	MARGARET ROSCIGNO	2.2 NAME	
STREET ADDRESS	1526 SOUTH FEDERAL HWY.	2.3 STREET ADDRESS	
CITY-ST-ZIP	DELRAY BEACH, FL 33483	2.4 CITY-ST-ZIP	
TITLE	D	3.1 TITLE	☐ Change ☐ Addition
NAME	CAROLYN FREDERICK	3.2 NAME	
STREET ADDRESS	1526 SOUTH FEDERAL HWY.	3.3 STREET ADDRESS	
CITY-ST-ZIP	DELRAY BEACH, FL 33483	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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)(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.

SIGNATURE:  **V. JAMES ROSCIGNO, PRES.**

(561) 276-7468

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Display Phone #

CR2E034 (9/96)