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

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F21699

(6)

Mailing Address

DELRAY MALL DRY CLEANERS, INC.

FILED								
Feb 14 1997	8:00am							
Secretary of State								

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1526 SOUTH FEDERAL HIGHWAY C/O V. JAMES ROSCIGNO DELRAY BEACH FL 33483-5032		C/O V. JAME	C/O V. JAMES ROSCIGNO DELRAY BEACH FL 33483-5032					
						 Date Incorporated or Qualified 03/02/1981 	3a. Date of 04/18/1	
2. Principal Pl	ace of Business	2a. Mailing A	ddress		***************************************	4. FEI Number		Applied For
21		26				59-2062785		Not Applicable
Suite, Apl.	#, etc.	Suite, Apt	. #, etc.			5. Certificate of Status Desired	1 1	.75 Additional Fee Required
City & State	?	City & Sta	nte			Election Campaign Financing Trust Fund Contribution	p-0404	5.00 May Be added to Fees
Zip	Country 25	Zip 29		Country 30	/	8. This corporation has liability for in	ntangible tax u	nder s. 199.032,
[4]	9. Name and Address of Cu					10. Name and Address of New Re-		
POS	CIGNO, V. JAMES	-		81	Name			
	S SOUTH FEDERAL HIGHWA	٧		-	Otrono Andre	do o Do Nigoto la Nest Accorda	la)	
	RAY BEACH FL 33444	•		83		dress (P.O. Box Number is Not Acceptab		
				84			85	Zip Code
					' '		FL	·
office or n	to the provisions of Sections 607, egistered agent, or both, in the S m familiar with, and accept the o	tate of Florida. Such c	handa was al	uthorized b	v the corpora	poration submits this statement for the pation's board of directors. I hereby accept	urpose of char of the appointm	iging its registered ent as registered
SIGNATURE								
	Signature, typed or printed name of registere		(NOTE		ent signature requ	ulred when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE EDG AND DIDE	CTORS IN 12
12.		AND DIRECTORS	DELETE	13.	—————	ADDITIONS/CHANGES TO CITYO		hange Addition
TITLE	PD DOCUMENT AND THE PROPERTY OF THE PROPERTY O	L) DECE IC	1.1 TITLE			·	nango (noonon
NAME	ROSCIGNO, V. JAMES			1.2 NAME	- 1			
STREET ADDRESS	1526 SO. FEDERAL HWY			1.3 STREE	T ADDRESS			
CITY - ST - ZIP	DELRAY BEACH FL		T BELEZE	1.4 CITY-	ST-ZIP			hange Addition
TITLE	STD] DELETE	2.1 TITLE	i		L.,	mange L_1 Addition
NAME	ROSCIGNO, MARGARET D	•		2.2 NAME		•		
STREET ADDRESS	1526 SO. FEDERAL HWY			2.3 STREE	T ADDRESS			
CITY - S1 - ZIP	DELRAY BEACH FL		T	2. 4 CITY-	ST-ZIP			Lanca Fill Address
TITLE	VD] DELETE	3.1 TITLE			ا ا	Change Addition
NAME	FREDERICK , CAROLYN H	•		3.2 NAME				
STREET ADDRESS	1526 SO. FEDERAL HWY			3.3 STREE	T ADDRESS			
CITY-ST-7IP	DELRAY BEACH FL			3.4. CITY	ST-ZIP			
TITLE		L	DELETE	4.1 TITLE			<u> </u>	Change
NAME				4. 2 NAMI				
STREET ADORESS				4.3 STREE	T ADDRESS			
CITY-ST-ZIP			<u></u>	4.4 CITY-	ST-ZIP			
THILE		L.] DELETE	5.1 TITLE			L) (Change Addition
NAME				5.2 NAME	ļ.			
STREET ADDRESS				5.3 STREE	T ADDRESS			
CITY-ST-ZIP				5.4 CITY-	ST-ZIP			
TITLE			DELETE	6.1 TITLE				Change
NAME				6.2 NAME				
STREET ADDRESS				63 STREE	T ADDRESS			
CITY-S1-ZIP				6.4 CITY-	ST-ZIP			
	by cortify that the information sur	onlied with this filing de	nes not qualif			ed in Section 119.07(3)(i), Florida Statute	s. I further cert	ify that the

4. 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 33 if changed, or on an attachment with an address.

SIGNATURE:

MATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-11-97 561-272-46

Oaytime Phone #