

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY 17 AM 8:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F94000003919 (7)

1. Corporation Name

DRYCLEAN U.S.A., INC.

Principal Place of Business

1875 W. COMMERCIAL BLVD
SUITE 140
FT LAUDERDALE FL 33309-3067

Mailing Address

1875 W. COMMERCIAL BLVD
SUITE 140
FT LAUDERDALE FL 33309-3067

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 07/27/1994	3a. Date of Last Report
4. FEI Number 93-1138698	Applied For 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	

2. Principal Place of Business	2a. Mailing Address
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country
25. Zip	30. Country

9. Name and Address of Current Registered Agent

SKARECKI, ROBERT G
1875 W. COMMERCIAL BLVD
SUITE 140
FT LAUDERDALE FL 33309-3067

10. Name and Address of New Registered Agent

81. Name Eddie J. Rodriguez
82. Street Address (P.O. Box Number is Not Acceptable) 1875 W. Commercial Blvd. #140
83. City FL. Lauderdale
84. FL 85. Zip Code 33309

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 of the registered agent and, if applicable,

(NOTE: Registered Agent signature required when consolidating)

DATE

5-11-95

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CP PUSHKIN, DENNIS 1875 W. COMMERCIAL BLVD, SUITE 140 FT LAUDERDALE FL 33309-3067	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP	PID Rodriguez, Eddie J. ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D GREER, TERENCE M 8044 MONTGOMERY RD, SUITE 170 CINCINNATI OH 45236	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BARRY, JAMES P 8044 MONTGOMERY RD, SUITE 170 CINCINNATI OH 45236	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP	C/D ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD DENBERG, ROBERT C 1875 W. COMMERCIAL BLVD, SUITE 140 FT LAUDERDALE FL 33309-3067	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ST NOCITO, MARK J 8044 MONTGOMERY RD, SUITE 170 CINCINNATI OH 45236	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP	☐ 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 110.07(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 applicable, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Eddie J. Rodriguez

5-11-95

Date

493-6700
205-4926750