

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F94000003919

1. Entity Name
DRYCLEAN U.S.A., INC.FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 JUN 15 AM 9:13

B0049064



DO NOT WRITE IN THIS SPACE

Principal Place of Business 1875 W. COMMERCIAL BLVD SUITE 140 FT LAUDERDALE FL 33309-3067	Mailing Address % DRYCLEAN USA MGMT. INC. 51 W. 135TH KANSAS CITY MO 64145
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2. Principal Place of Business 7771 W. ORLAND BLVD Suite, Apt. #, etc. SUITE 201 City & State SUNRISE FL. Zip 33351	3. Mailing Address C/O DELIA'S CLEANERS Suite, Apt. #, etc. 14500 NORTHSIGHT STE 214 City & State SCOTTSDALE, AZ Zip 85260
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4. FEI Number 93-1138698	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent RODRIGUEZ, EDDIE J 1875 W COMMERCIAL BLVD. STE 140 FT LAUDERDALE FL 33309 CT CORPORATION 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324

7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 Barbara A Burke **BARBARA A. BURKE** 6-14-01
SPECIAL ASSISTANT SECRETARY
Signature, typed or printed name of registered agent and site if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD RODRIGUEZ, EDDIE J 1875 W. COMMERCIAL BLVD, SUITE 140 FT LAUDERDALE FL ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TRASURER PATRICE H. BOYER 14500 N. NORTHSIGHT STE 214 SCOTTSDALE, AZ 85260 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BARRY, JAMES P 51 WEST 135TH ST KANSAS CITY MO ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V VADOVICKY, PAUL J 1875 W COMMERCIAL BLVD, #140 FT LAUDERDALE FL ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ASST. TRASURER 14500 N. NORTHSIGHT STE 214 SCOTTSDALE, AZ 85260 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S CAVITT, BRUCE E 1875 W COMMERCIAL BLVD, #140 FT LAUDERDALE FL ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ASST. SECRETARY 14500 N. NORTHSIGHT BLVD STE 214 SCOTTSDALE, AZ 85260 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DAWN R. ATHEARN SECRETARY 14500 N. NORTHSIGHT STE 214 SCOTTSDALE, AZ 85260 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR PHILIP A. DELIA 14500 NORTHSIGHT STE 214 SCOTTSDALE, AZ 85260 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition SP

13. I 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 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 all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)