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

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G03436

(4)

Mailing Address

DELRAY SQUARE CLEANERS, INC.

FILED Apr 30 1998 8:00am Secretary of State



P.O. BOX 6247 DELRAY BON FL 33445		DELRAY BCH FL 33445		DO NOT WRITE IN TH	DO NOT WRITE IN THIS SPACE		
		US			3. Date Incorporated or Qualified		
					09/28/1982		
2. Principal P	lace of Business	2a. Mailing Address		••	4. FEt Number	Applied Fo	
21		26 SAM C			59-2227520	Not Applica	
Suite, Apt. 22 475/	#, OIC. ATLANTIC.	Suite, Apt #; etc.			5. Certificate of Status Desired	\$8.75 Additiona Fee Required	
City & State	ay Bul FC	City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Zip	Count	ry	8. This corporation owes or has paid the		
24 3345	f 5 25 1/3.	29	30		Personal Property Tax due June 30.	Ye No	
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Registers	d Agent	
MA	rt, harvey c.		8	1 Name	9		
	11 W ATLANTIC AVE		8:	2 Stree	t Address (P.O. Box Number is Not Acceptable)		
DEI	LRAY BEACH FL 33445				, , ,		
			8:	3			
			84	4 City	F	85 Zip Code	
office or re	to the provisions of Sections 607.050 egistered agent, or both, in the State or familiar with, and accept the oblig	e of Florida. Such change was a	authorized b	ov the co	d corporation submits this statement for the purpose or or poration's board of directors. I hereby accept the a	of changing its registe	
SIGNATURE	Signature types or presed some of registranting	regand tale diappheable (NOI)	E Registered A	gent signatu	are required when reinstating) DATE	:	
12.	OFFICERS AN	ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12	
TITLE	PD	DELETE	1.1 TITLE		HANNEY C. MART	Change Add	
NAME	Mart, Harvey C		1.2 NAME		3221 5 Oceau Bi	WI Hall	
STREET ADDRESS	548 NW SOTH AVE	ress	1.3 STREE	1 ADDRESS	HIBHCAND BL	1 41	
CITY-ST-ZIP	DELRAY BOTHEL 17 17 11	(C	1.4 CiTY-	ST-ZIP	HIBHCAND BU	1 FC 334	
TITLE	D	DELETE	21 TITLE			Change Add	
NAME	Frank, Gary		2.2 NAME				
STREET ADDRESS	10959 NW 19TH ST.		2 3 S1RE	T ADDRESS			
CITY-ST-ZIP	CORAL SPRINGS FL 33071		2. 4 CITY	- ST - ZIP			
TITLE		DELETE	3.1 TITLE			Change Add	
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREE	T ADDRESS			
CITY-ST-ZIP			3.4. CITY	· \$1-2IP			
TITLE		☐ DELETE	4.1 TITLE	· 		Change Add	
NAME			4. 2 NAM	:			
STREET ADDRESS			4.3 STREE	T ADDRESS			
CITY-ST-ZIP		··	4.4 CITY-	ST-ZIP			
TITLE	•	☐ DELETE	5.1 TITLE			Change Addi	
NAME	i e		5.2 NAME				
STREET ADDRESS	•		5.3 STREE	T ADDRESS			
CITY-ST-ZIP			5.4 CITY-	ST - ZIP			
TITLE	•	☐ DELETE	6 1 TITLE			☐ Change ☐ Addi	
NAME			6.2 NAME				
STREET ADDRESS			63 STREE	T ADDRESS			
CITY-ST-ZIP			6.4 City-				
indicated (on this annual report or supplements	al aunual report is true a nd a cci	urate and th	ia vm ter	ted in Section 119.07(3)(i), Florida Statutes. I further ignature shall have the same legal effect as if made as required by Chapter 607, Florida Stalules; and tha	under oath: that I am ar	