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May 28 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # K41779 (5)
1. Corporation Name
EXECUTIVE STYLE CLEANERS, INC.



Principal Place of Business
9725 NW 41 STREET STORE 25
MIAMI FL 33176

Mailing Address
9725 NW 41 STREET STORE 25
MIAMI FL 33176-2944

3. Date Incorporated or Qualified 10/21/1988
3a. Date of Last Report 03/15/1996

2. Principal Place of Business (21-24) and Mailing Address (2a-24) fields with sub-fields for Suite, City, State, Zip, and Country.

4. FEI Number 65-0133795
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 [X] Yes [] No

9. Name and Address of Current Registered Agent
RODRIGUEZ, DIEGO
9725 NW 41 ST.
MIAMI FL 33178

10. Name and Address of New Registered Agent (81-85)

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: _____ (NOTE: Registered Agent signature required when re-stating) DATE: _____

Table 12: OFFICERS AND DIRECTORS. Includes entry for P DE FALCO, RONALD, 30 N LA SALLE ST 2024 CHICAGO IL.

Table 13: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Includes fields 1.1 through 6.4.

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 checked, or on an attachment with an address.

SIGNATURE: _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE: _____ Daytime Phone # _____

CR2E034 (9/96)