2008 FOR PROFIT CORPORATION

FILED **ANNUAL REPORT** May 02, 2008 08:00 AN Secretary of State DOCUMENT # K44657 R & K CLEANERS, INC. Mailing Address Principal Place of Business 7929 N.W. MIAMI CT 7929 N.W. MIAMI CT MIAMI, FL 33150-3070 MIAMI, FL 33150-3070 04272008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0082385 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Regulred 6. Name and Address of Current Registered Agent KARIM, ALNOOR DO NOT WRITE 16410 MIAMI DRIVE #407 N. MIAMI BEACH, FL 33162 IN THIS SPACE 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent alguature required when reinstating) U00000943578 05/29/08-80064-012 150.00 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE 18 \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 10. OFFICERS AND DIRECTORS TITLE KARIM, ALNOOR NAME STREET ADDRESS 16410 MIAMI DR #407 CITY-ST-ZIP MIAMI, FL 33162 DV TITLE RAMJI, SULLY NAME STREET ADDRESS 222 NE 1ST AVE CITY-ST-ZIP HALLANDALE, FL TΠIF NAME KARIM, SHABIR STREET ADDRESS 16410 MIAMI DR #407 DO NOT WRITE CITY-ST-ZIP N. MIAMI BEACH, FL 33162 IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachm

SIGNATURE:

TITLE NAME STREET ADDRESS CITY-ST-ZIP

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