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File Now. Filing Fee after May 1 is \$225.00

CORPORATION  
ANNUAL REPORT  
1993



FLORIDA DEPARTMENT OF STATE  
Jan Smith  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

1993 MAY -1 PM 1:32

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. Name and Mailing Address of Corporation DOCUMENT # K52524 (1)

GENRA CLEANING CORP.  
1337 NW 108TH AVE  
CORAL SPRINGS FL 33071-8216

DO NOT WRITE IN THIS SPACE

3. Date of Incorporation or Qualification 12/20/1988  
3a. Date of Last Report 07/03/1992  
4. FEI Number 650100393  
Applied For  
By Approval

FILING FEE \$200.00  
ANNUAL REPORT \$81.25 + \$138.75 CORPORATION SUPPLEMENTAL FEE  
MAKE CHECK PAYABLE TO DEPARTMENT OF STATE

|                    |                     |                                 |                     |                                                                                            |  |                                                          |  |
|--------------------|---------------------|---------------------------------|---------------------|--------------------------------------------------------------------------------------------|--|----------------------------------------------------------|--|
| 2. Mailing Address |                     | 2a. Principal Place of Business |                     | 5. Certificate of Status Desired                                                           |  | 8.75 Additional Fee Required                             |  |
| 21                 | State, Apt. #, etc. | 26                              | State, Apt. #, etc. | <input type="checkbox"/>                                                                   |  | <input type="checkbox"/>                                 |  |
| 22                 | City & State        | 27                              | City & State        | 6. Election Campaign Financing Trust Fund Contribution                                     |  | <input type="checkbox"/>                                 |  |
| 23                 | Zip                 | 28                              | Country             | 7. Nonprofit with IRS 501(c)(3) Tax Exempt Status                                          |  | <input type="checkbox"/>                                 |  |
| 24                 | Country             | 29                              | Country             | 8. This corporation has liability for penalties under Section 1361(b)(2), Florida Statutes |  | <input type="checkbox"/> Yes <input type="checkbox"/> No |  |

9. Name and Address of Current Registered Agent

LIEBOVITZ, EUGENE  
1337 N.W. 108TH AVE.  
CORAL SPRINGS FL 33071

|    |      |    |                                                  |    |  |    |      |    |          |    |         |
|----|------|----|--------------------------------------------------|----|--|----|------|----|----------|----|---------|
| 81 | Name | 82 | Street Address (P.O. Box Number is Not Accepted) | 83 |  | 84 | City | 85 | Zip Code | 86 | Country |
|    |      |    |                                                  |    |  |    | FL   |    |          |    |         |

11. Pursuant to the provisions of Sections 607.0502 and 607.1508 or Sections 617.0502 and 617.1508, Florida Statutes, the above named corporation certifies 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 \_\_\_\_\_ DATE \_\_\_\_\_  
Registered Agent Accepting Appointment

| 12. OFFICERS AND DIRECTORS |                      |                  |  | 13. OFFICERS AND DIRECTORS CHANGES |  |                  |  |
|----------------------------|----------------------|------------------|--|------------------------------------|--|------------------|--|
| 11 TITLE                   | D                    | 11 TITLE         |  | 11 TITLE                           |  | 11 TITLE         |  |
| 12 NAME                    | LIEBOVITZ, EUGENE    | 12 NAME          |  | 12 NAME                            |  | 12 NAME          |  |
| 13 ADDRESS                 | 1337 N.W. 108TH AVE. | 13 ADDRESS       |  | 13 ADDRESS                         |  | 13 ADDRESS       |  |
| 14 CITY, ST, ZIP           | CORAL SPRINGS FL     | 14 CITY, ST, ZIP |  | 14 CITY, ST, ZIP                   |  | 14 CITY, ST, ZIP |  |
| 21 TITLE                   |                      | 21 TITLE         |  | 21 TITLE                           |  | 21 TITLE         |  |
| 22 NAME                    |                      | 22 NAME          |  | 22 NAME                            |  | 22 NAME          |  |
| 23 ADDRESS                 |                      | 23 ADDRESS       |  | 23 ADDRESS                         |  | 23 ADDRESS       |  |
| 24 CITY, ST, ZIP           |                      | 24 CITY, ST, ZIP |  | 24 CITY, ST, ZIP                   |  | 24 CITY, ST, ZIP |  |
| 31 TITLE                   |                      | 31 TITLE         |  | 31 TITLE                           |  | 31 TITLE         |  |
| 32 NAME                    |                      | 32 NAME          |  | 32 NAME                            |  | 32 NAME          |  |
| 33 ADDRESS                 |                      | 33 ADDRESS       |  | 33 ADDRESS                         |  | 33 ADDRESS       |  |
| 34 CITY, ST, ZIP           |                      | 34 CITY, ST, ZIP |  | 34 CITY, ST, ZIP                   |  | 34 CITY, ST, ZIP |  |
| 41 TITLE                   |                      | 41 TITLE         |  | 41 TITLE                           |  | 41 TITLE         |  |
| 42 NAME                    |                      | 42 NAME          |  | 42 NAME                            |  | 42 NAME          |  |
| 43 ADDRESS                 |                      | 43 ADDRESS       |  | 43 ADDRESS                         |  | 43 ADDRESS       |  |
| 44 CITY, ST, ZIP           |                      | 44 CITY, ST, ZIP |  | 44 CITY, ST, ZIP                   |  | 44 CITY, ST, ZIP |  |
| 51 TITLE                   |                      | 51 TITLE         |  | 51 TITLE                           |  | 51 TITLE         |  |
| 52 NAME                    |                      | 52 NAME          |  | 52 NAME                            |  | 52 NAME          |  |
| 53 ADDRESS                 |                      | 53 ADDRESS       |  | 53 ADDRESS                         |  | 53 ADDRESS       |  |
| 54 CITY, ST, ZIP           |                      | 54 CITY, ST, ZIP |  | 54 CITY, ST, ZIP                   |  | 54 CITY, ST, ZIP |  |
| 61 TITLE                   |                      | 61 TITLE         |  | 61 TITLE                           |  | 61 TITLE         |  |
| 62 NAME                    |                      | 62 NAME          |  | 62 NAME                            |  | 62 NAME          |  |
| 63 ADDRESS                 |                      | 63 ADDRESS       |  | 63 ADDRESS                         |  | 63 ADDRESS       |  |
| 64 CITY, ST, ZIP           |                      | 64 CITY, ST, ZIP |  | 64 CITY, ST, ZIP                   |  | 64 CITY, ST, ZIP |  |

14. I 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. I further certify 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 or Chapter 617, Florida Statutes, and that my name appears on block 12, block 13, or block 14, or on an attachment with an address.

SIGNATURE \_\_\_\_\_ DATE 4/14/93  
Print Type Name of Signing Officer or Director EUGENE LIEBOVITZ Title PRES  
Corporate Telephone Number ( )