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

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

2. Principal Place of Business

Suite, Apt. #, etc.

Oity & State

% PAULINE DEARSON

18151 BE 19TH AVE N. MIAMI BEACH FL 33162

US

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12.

THE

NAME

THUE

NAME

STREET ACORESS

CITY STAZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

Country

81 Name

83

13.

1.1 TITLE

1.2 NAME

2.1 TITLE

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

DELETE

DELETE

City

30

DOCUMENT # L15695

(4)

Mailing Address 18151 BE 19TH AVE

2a. Mailing Address

City & State

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18115 N.E. 19TH AVENUE

Suite, Apt. #, etc.

N. MIAMI BEACH FL 33162-1605

BRITE CLEANERS AND ALTERATIONS, INC.

Country

9. Name and Address of Current Registered Agent

Signature, typical or printed name of registerical agent and too, if applicable

OFFICERS AND DIRECTORS

25

DEARSON, PAULINE

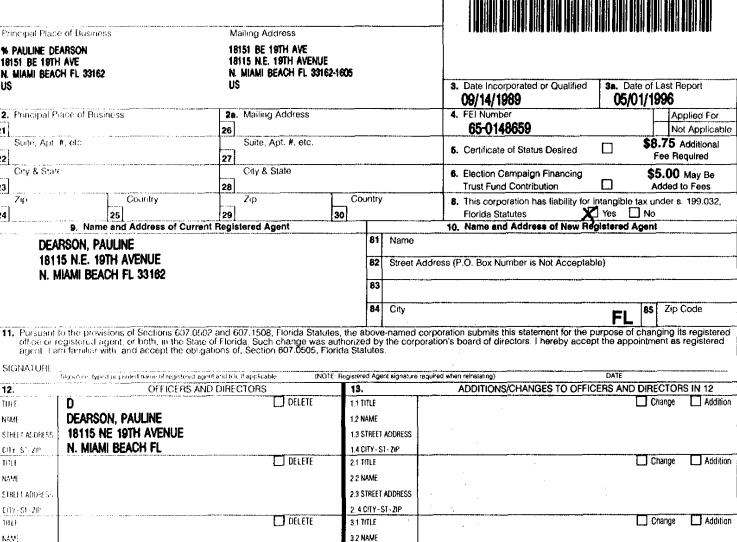
N. MIAMI BEACH FL

18115 NE 19TH AVENUE

DEARSON, PAULINE 18115 N.E. 19TH AVENUE

N. MIAMI BEACH FL 33162

FILED Apr 21 1997 8:00am Secretary of State



2.2 NAME 2.3 STREET ADDRESS STREET ADDRESS C) Tr - \$1 - 2(P) 2. 4 CITY-ST-ZIP DELETE 3.1 TITLE 3.2 NAME NAM5 STREET ADDRESS 3.3 STREET ADDRESS CHT-ST-ZIP 3.4 CITY-ST-ZIP Change Addition DELETE 4.1 TITLE THE 4. 2 NAME MM STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY - ST - ZV DELETE 51 TITLE Change Addition 101,1 5.2 NAME NAME 53 STREET ADDRESS STREET ADDRESS 54 CITY-ST-ZIP 0014-S1-76 Change Addition DELETE TITLE 61 TITLE 62 NAME HAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY - ST - ZIP Dity-ST-ZP 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 proof or upplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the conformation of 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 changed on an attachment with an address. SIGNATURE Daytime Phone #