


File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS		FILED 99 APR 14 AM 10:45 TALLAHASSEE, FLORIDA													
FILING FEE \$ 188.75 Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE																	
1. Name and Mailing Address of Limited Liability Company DOCUMENT # L98000001644 CINDERELLA SUPERLAUNDRY, L.C. 18700 NE 18TH AVENUE, NO. 103 NORTH MIAMI BEACH FL 33179				1a. Principal Place of Business Address 18700 NE 18TH AVENUE, NO. 10 NORTH MIAMI BEACH FL 33179 <i>NOTE: Use this address for all correspondence. This is my home.</i>													
2. Principal Place of Business 310-W-Hallandale Beach Blvd Hallandale 33009		2a. Mailing Address Same as Above Suite, Apt. #, etc. City & State Zip Country		3. Date Organized or Qualified 08/27/1998 3a. State of Formation FL 4. FEI Number 065-0872798 5. Date of Last Report First Time 6. Certificate of Status Desired <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable <input type="checkbox"/> \$8.75 Additional Fee Required													
7. Name and Address of Current Registered Agent DEBRITO, ALICE 18700 NE 18TH AVENUE, NO. 103 NORTH MIAMI BEACH FL 33179 <i>NOTE: use my home address for all correspondence.</i>			B. Name and Address of New Registered Agent/Office Name: Alice de Brito Street Address (P.O. Box Number is Not Acceptable): 18700 - NE 18th Ave apt 103 Suite, Apt. #, etc. City: North Miami Beach FL Zip Code: 33179														
9. Pursuant to the provisions of Sections 608 416 and 608 508, Florida Statutes, the above-named limited liability company 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 affirmative vote of a majority of the members. Thereby accept the appointment as registered agent, and accept the obligations																	
SIGNATURE _____ DATE _____																	
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 10%;">10. Title</th> <th style="width: 30%;">Managing Members/Managers</th> <th style="width: 30%;">Business Street Address</th> <th style="width: 30%;">City, State and Zip Code</th> </tr> <tr> <td>MGRM</td> <td>COUTINHO, J.D.</td> <td>257 VALENTINE LANE , BASEM</td> <td>YONKERS NY</td> </tr> <tr> <td>MGRM</td> <td>DEBRITO, ALICE</td> <td>18700 NE 18TH AVENUE, NO.</td> <td>NORTH MIAMI BEACH FL</td> </tr> </table>						10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code	MGRM	COUTINHO, J.D.	257 VALENTINE LANE , BASEM	YONKERS NY	MGRM	DEBRITO, ALICE	18700 NE 18TH AVENUE, NO.	NORTH MIAMI BEACH FL
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4000002848104 - 8 -04/22/99 -01104 -002 ****188.75 ****188.75 4-19-99																	
11 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 is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes, and that my name appears in Block 10, or on an attachment with an address																	
SIGNATURE: <u>Alice de Brito</u>																	