

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

PROFIT CORPORATION ANNUAL REPORT 1997



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

FILED Apr 24 1997 8:00am Secretary of State

DOCUMENT # M22809 (1) 1. Corporation Name JOE CLEANERS FRANCHISE CORP.



Principal Place of Business 16766 N.W. 67TH AVE. MIAMI FL 33015 Mailing Address 16766 N.W. 67TH AVE. MIAMI FL 33015-4202

3. Date Incorporated or Qualified 11/01/1985 3a. Date of Last Report 07/25/1996 4. FEI Number 65-0075285 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 Yes No

2. Principal Place of Business 21 22 23 24 2a. Mailing Address 26 27 28 29 30

9. Name and Address of Current Registered Agent CALABRESE, GIUSEPPE 15414 NW 77 CT MIAMI LAKES FL 33016

10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code

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: [Signature] (NOTE: Registered Agent signature required when re-registering) DATE

Table 12: OFFICERS AND DIRECTORS. Columns: TITLE, NAME, STREET ADDRESS, CITY - ST - ZIP. Includes entry for DPST CALABRESE, GIUSEPPE.

Table 13: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Columns: 1.1 TITLE, 1.2 NAME, 1.3 STREET ADDRESS, 1.4 CITY - ST - ZIP, etc.

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 changed, or on an attachment with an address.

SIGNATURE: [Signature] 4/17/97 (305) 577-7271

CR2E034 (9/96)