FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1996 **DOCUMENT #** 1. Corporation Name CROSSTOWN CLEANERS, INC. Mailing Address Principal Place of Business C/O WILLIAM R. HOOKS, SR. C/O WILLIAM R. HOOKS, SR. 226 CENTRAL STREET #A-1 226 CENTRAL STREET #A-1 JUPITER FL 33458 JUPITER FL 33458 3a. Date of Last Report 3. Date Incorporated or Qualified 03/10/1988 02/27/1995 4. FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address 59-2884356 216 CENTEL Not Applicable \$8.75 Additional Suite, Apt #, etc Suite, Apt. #, etc 5. Certificate of Status Desired Fee Required 22 6. Flection Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 This corporation has liability for intengible tax under s. 199.032, Zio Yes No Florida Statutes 24 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 1 ORANGE HOOK, WILLIAM R., SR. O. Box Number is Not Acceptable) 82 **577 SABAL LAKE DRIVE** 83 LONGWOOD FL 32779 84 UPITEL 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE CR2E034 (12/95) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change Addition DELETE TITLE 1 1 TOLE Da El HOOK, WILLIAM R., SR. 1.2 NAME FLORENIE NAME 1301 SEAFARER CT #206 1.3 STREET ADDRESS STREET ADDRESS JUPITER FL 1.4 CITY - ST - ZIP CITY - ST - ZIP DELFTE 2 1 TITLE TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 C/TY - ST - 7/P CITY-ST-ZIP DELETE 3 1 Ida F Change Change Addition TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CHY+SI-ZIP CITY - ST- ZIP DELETE Change Addition 4.13HLE THILE 400001779504 -04/15/36--01024--007 4.2 NAME NAMÉ STREET ADDRESS 4.3 STREET ADDRESS ***<u>200.00</u> 4.4 C(1Y - ST - Z)F CITY-S1-ZIP Change Addition DELETE TITLE 5.1 TIME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 6 1 TILLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CHY -\$1-20 CITY-ST-ZIP 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(x). Florida Statutes, I further certify that the information indicated on this annual report or supplicational 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

OFFICER OR DIRECTOR