


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

\$150.00
Florida Department of State
FILED
Apr 08, 2005 08:00 AM
Secretary of State

DOCUMENT # P00000028568 1. Entity Name CORPORATE DRY CLEANERS INC.	
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Principal Place of Business 1 SE 3RD AVENUE SUITE 408 MIAMI, FL 33131	Mailing Address 1 SE 3RD AVENUE SUITE 408 MIAMI, FL 33131
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DO NOT WRITE IN THIS SPACE



03142005 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0995261	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GUTIERREZ, DOLALILA
1 SE 3RD AVENUE
SUITE 408
MIAMI, FL 33131

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE:  3-14-05
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing) DATE

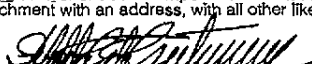
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U000000293175 04/08/05-80018-008 150.00
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GUTIERREZ, DOLALILA 1 SE 3RD AVENUE SUITE 408 MIAMI, FL 33131
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD GUTIERREZ, GABRIEL 1 SE 3RD AVENUE SUITE 408 MIAMI, FL 33131
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  3-14-05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #