2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED

DOCUMENT # P02000033045 1. Entity Name BEST PRICE DRY CLEANERS USA, INC.						O3 MAY 15 AM 10: SECRETARY OF STALLAHASSEE FLOA			
Principal Place 4791 NW 163 MIAMI, FL 33	7TH STREET	3	Mailing Address 479 MM 167TH STREET MAMI, PL 33055			(,)	NDA	-	
2. Principal P	lace of Busin	ess	3. Mailing Address						
Suite, Apt. #, etc.			Sulte, Apt. #, etc.			□ снеск нея	RE IF MAKING	CHANGES	
City & State				Mism, LAKES PL			711	_ 	plied For Applicable
Zip		Country	^{zip} 33014	Count	75	5. Certificate of Status Desired	, d :	8.75 Add	
6. Name and Address of Current Registered Agent					Name	7. Name and Address of Nev	v Registered A	gent	
HERNANDE 4791 NW 16 MIAMI, FL 3	STRE STRE		•		Street Address (P.O. Box Number Is Not Acceptable)				
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					City		FL	Zip Code	
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 Signature, hypothor primed name of equisioned agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) EILE: NOW/III: FEE is \$150.00 9. Election Campaign Financing \$5.00 May Be									
After May 1, 2003 Fee will be \$550,00 Make Check Payable to Florida Department of State						Trust Fund Contribu	ution.	Added	I to Fees
10. 1i1LE	D	OFFICERS AN	D DIRECTORS Delete	11. 10LE		ADDITIONS/CHANGES TO C	FFICERS AND	DIRECTORS Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP		EZ, JOSE F 167TH STREET 33055	NAM Stre		T ADDRESS ST-ZIP	500019 05/22/030104	17371 16003		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			□ Delete	H				☐ Change	☐ Addition
THTLE NAME STREET ADDRESS CITY-ST-2P			☐ Delete	u	T ADDRESS ST -21P			Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-2P			☐ Delete		t address st-zip			☐ Change	Addition Addition
TITLE NAME STREET ADDRESS CITY-ST-ZP			☐ Delete	1	T ADDRESS ST - ZIP			☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			□ Delete	Ħ	T ADDRESS ST -ZIP			Change	☐ Addition
12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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 of 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: SIGNATURE AND THREE OR PRINTED INVALED F SIGNANG OFFICER OR DIRECTOR DAIR CAYLIFFE PROPRE									
		4							21 5/15

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ASSOCIATED TAX CONSULTANTS, INC.

May 13, 2003

DIVISION OF CORPORATIONS UNIFORM BUSINESS REPORT FILINGS P.O.BOX 1500 TALLAHASSEE, FL 32302-1500

REF: ANNUAL REPORT: YEAR 2003 BEST PRICE DRY CLEANERS USA, INC. DOC # P02000033045

To Whom It May Concern:

AS PER OUR CONVERSATION, WE NEVER RECEIVED AN ANNUAL REPORT
DUE TO A WRONG MAILING ADDRESS. PLEASE NOTE THE NEW MAILING
ADDRESS IN ATTACHED ANNUAL REPORT "MAILING ADDRESS" ON ANNUAL
REPORT FORM AS PER YOUR INSTRUCTIONS.

WE ARE REPECTFULLY REQUESTING THAT THE DIVISION OF CORPORATIONS ACCEPT THE \$ 150.00 IN PAYMENT OF THE ANNUAL REPORT AND \$ 8.75 FOR CERTIFICATE OF STATUS AS REQUESTED.

THANKING YOU IN ADVANCE FOR YOUR UTMOST CONSIDERATION.

Sincerely,

Edward Garcia, BBA, EA PRESIDENT

EDWARD GARCIA, EA - 20866 EA - ENROLLED AGENT PRACTICING BEFORE THE INTERNAL REVENUE SERVICE