2006 FOR PROFIT CORPORATION ANNUAL REPORT

Secrétary of State DOCUMENT # P02000099746 07-06-2006 90005 036 ***150.00 1. Entity Name FLA CLEANERS, INC. Principal Place of Business Mailing Address 1695 FORUM PLACE 1695 FORUM PLACE WEST PALM BEACH, FL 33401 WEST PALM BEACH, FL 33401 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 07032006 CR2E034 (11/05) City & State City & State 4. FEI Number Applied For 75-3081282 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Roberto RODRIGUEZ, ROBERTO Street Address (N.D. Box Number is Not Acceptable) 165 E PALMETTO PARK ROAD Forom place BOCA RATON, FL 33432 Zip Code **3340** [pmilts 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 8. The above named the obligations of ŞIGNATURE (NOTE: Registered Agent signature required when reinstating) name of registered agent and title if applicable. 9. Election Campaign Financing FILE NOW!!! FEE IS \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees Due by September 6, 2006 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. Addition Change TITLE ☐ Delete TITLE RODRIGUEZ, ROBERTO NAME NAME STREET ADDRESS 1695 FORUM PLACE STREET ADDRESS WEST PALM BEACH, FL 33401 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Addition TITLE Change TITLE NAME RODRIGUEZ, ELIZABETH S NAME STREET ADDRESS 1695 FORUM PLACE STREET ADDRESS WEST PALM BEACH, FL 33401 CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Addition TITLE Change TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7/P CITY-ST-ZIP ☐ Addition Delete ☐ Change TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information symplicid with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental peport 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 trusted 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 agraress, with all other like empowered.

TURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED Jul 06, 2006 8:00 am Roberto Rodriguez ATTACHMENT 20097160 I Never received the revewal form.

It was sent to a different address and never got forwarded to me.

thank you

Any avestions Call 521- 684-9764.

Dry Clan USA 1695 Forem Phee

W. P.B. FL 33401

TEI # 75-3081882