2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P06000143389

Entity Name: SUPERIOR DRY CLEANING, INC.

FILED Jun 28, 2007 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

17501 NE 9TH AV 16750 NE 10 AVE

NORTH MIAMI BEACH, FL 33162 US APT 212

NORTH MIAMI BEACH, FL 33162 US

Current Mailing Address: New Mailing Address:

17501 NE 9TH AV 16750 NE 10 AVE

NORTH MIAMI BEACH, FL 33162 US APT 212

NORTH MIAMI BEACH, FL 33162 US

FEI Number: 20-5880605 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LIND, TUVIA

17501 NE 9TH AV

NORTH MIAMI BEACH, FL 33162 US

RASKIND, MICHAEL
16750 NE 10 AVE
APT 212

NORTH MIAMI BEACH, FL 33162 US APT 212
NORTH MIAMI BEACH, FL 33162 US

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.

SIGNATURE: MICHAEL RASKIND 06/28/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Name:
 LIND, TUVIA
 Name:
 RASKIND, MICHAEL

 Address:
 17501 NE 9TH AV
 Address:
 16750 NE 10 AVE APT 212

City-St-Zip: NORTH MIAMI BEACH, FL 33162 US City-St-Zip: NORTH MIAMI BEACH, FL 33162 US

Name: LIND, ARI Name: RASKIND, LEE

Address: 17501 NE 9TH AV Address: 16750 NE 10TG AVE APT 212
City-St-Zip: NORTH MIAMI BEACH, FL 33162 US City-St-Zip: NORTH MIAMI BEACH, FL 33162 US

Title: () Delete Title: T () Change (X) Addition

Name: Name: RASKIND, JACOB

 Name.
 RASKIND, 0ACOB

 Address:
 Address:

 City-St-Zip:
 City-St-Zip:

 NORTH MIAMI BEACH, FL 33162 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL RASKIND P 06/28/2007