FILE NOW: FILING FEE AFTER MAY 1 IS \$5

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTM OF STATE

Secretary of

FILED May 14 1997 8:00am Secretary of State

•	1997	The state of the s	DIVISION OF	CC	RATIO	INS		Boolett	ıı y v		iaic
	MENT # PS ERG CLEANERS, I) 1494 (3)								
Principal Place of Business			Mailing Address								
2300 N.E. 62NC	O ST		2300 N.E. 62ND 8T								
SUITE 205-E	DALE EL 99900		hte 206-e Art Lauderdale FL :	22278.							
FORT LAUDERDALE FL 33308 US		·	US				3.	Date Incorporated or Qualified 12/13/1994		te of Last Re 15/1996	port
2. Principal Pl	ace of Business	28.	Mailing Address			 	4.	FEI Number			plied For
21		26			<u> </u>			65-0543563			Applicable
Suite, Apt	#, etc.	<u> </u>	Suite, Apt. #, etc.				5.	Certificate of Status Desired		\$8.75 A	
22 City & State	<u> </u>	27	City & State		ł		B	Election Campaign Financing	· · · · · · · · · · · · · · · · · · ·	\$5.00	·
23	,	28			1		"	Trust Fund Contribution		Added to	
Zip	Country		Zip		intry		8.	This corporation has liability for			199.032,
24	25	29		30	<u> </u>			1 (0.144 Othiosp	Yes L	No	
	9. Name and Addre	ss of Current Regist	iered Agent		81	Name	10	. Name and Address of New R	edistered t	igent	
	CER, STEPHEN G										
4800 N FEDERAL HWY SUITE 205-E					82	Street Add	Iress (P.O. Box Number is Not Accepta	ble)		
	CA RATON FL 33431				83				<u></u>		***************************************
boc	A HATON I E 9070 I									let Zin C	Sada -
					84	City			FL	as Zip C	
11. Pursuant l	to the provisions of Sect	ions 607.0502 and 60	07.1508, Florida Stat	utes, th	e XXVI	-named cor	porati	on submits this statement for the	purpose of	changing its	s registered
office or n agent. La	egistered agent, or both mifamiliar with, and acci	i, in the State of Floric ept the obligations of	la. Such change was , Section 607.0505, I	s author Florida :	czul Dy Strutes	i the corpora 3.	non s	on submits this statement for the board of directors. I hereby acco	abrane arbb	ו 25 אוופוזוטוווג	egistered
SIGNATURE					1						
	Signature, type-d or printed name			OTE Regit		nt signature requ		ar reinstating) ADDITIONS/CHANGES TO OFF	DATE	DIDECTOR	S IN 12
12.	PSD O	FFICERS AND DIREC	DELETE		8 1 E			ADDITIONS/CHANGES TO OFFI	CENS AND	Change	Addition
NAME	GOLDBERG, JACK		[] better	- 1	. 2 ME	1					
S*REET ADDRESS	2009 SW 36 AVE				10	ADDRESS					
CHY-SI-ZIP	DELRAY BEACH FL	L 33445		1	- 1	T-ZIP					
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NAME				3	21 E						
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City-St-ZiP						ST - ZIP					
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CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·			.4 DITY -	ST · ZIP				06	Addition
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NAME				1	2 NAME	. 1					
STREET ADDRESS						T ADDRESS					
C(*Y - \$1 - Z(*)					3.4 CITY-	ST-ZIP		Section 110 07/2\(i) Elevida Statu	too I furtho	r certify that	the

14. I do hereby cartify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental 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 appears in Block 12 or Block 13 if charged, or on an attachment with an address.

SIGNATURE:

772 3619