561-495-7598

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

SIGNATURE:

FILED PROFIT CORPORATION FLORIDA DEPARTMENT OF STATE Katherine Harris ANNUAL REPORT 59 JUL 12 MM 8: 22 Secretary of State 1999 **DIVISION OF CORPORATIONS** OUT MARY OF STATE THE LAW SEE, FLORIDA **DOCUMENT #** P94000090494 GOLDBERG CLEANERS, INC. Principal Place of Business Mailing Address 2300 N.E. 62ND ST 2300 N.E. 62ND ST SUITE 205-E SUITE 205-E FORT LAUDERDALE FL 33308 FORT LAUDERDALE FL 33308 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/13/1994 FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 65-0543563 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Zio Country B. This corporation owes the current year Country Yes 24 29 Intangible Personal Property. 25 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name MELCER, STEPHEN G Street Address (P.O. Box Number is Not Acceptable) 4800 N FEDERAL HWY SUITE 205-E 83 **BOCA RATON FL 33431** 84 City 85 Zip Code 11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE CR2E034 (5/99) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. PSD TITLE 1.1 TITLE DELETE Change Addition GOLDBERG, JACK NAME 1.2 NAME 2009 SW 36 AVE STREET ADDRESS 1.3 STREET ADDRESS **DELRAY BEACH FL 33445** CITY-ST-ZIP 1.4 CITY-ST-ZIP Change Addition TITLE DELETE 2 1 TITLE 36 TH ALE NAME 2.2 NAME STREET ADDRESS 2 3 STREET ADDRESS CITY-ST-ZIP 2 4 CITY-ST-ZIP 3.1 TITLE TITLE DELETE NAME 3.2 NAME STREET ADDRESS 3 3 STREET ADDRESS 01098~-009 CITY-ST-ZIP 3 4 CITY-ST-ZIP ****150.00 ***150.00_~ TITLE 4.1 TITLE DELETE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE Change Addition NAME 52 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY ST-ZIP TITLE 6.1 TITLE DELETE Change Addition NAME R 2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP 14. Thereby certify 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 findicated 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; the 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

RESIDENT

BUSING

**BUSIN

DIVISION of Corporation P.O. Box 1500 TAILAHASSEE, 71.

Ke: Annual Report

Gentlemen !

I'm enclosing the Annual Report And the check for the Annual fee for \$150,00, To Keep this corporation Active.

My husband Jack Boldberg normally handles All bussiness matters, But he has been extremly sick For the PAST YEAR with CANCER.

I just received your and notice And I Implore you to please excuse Any late charges and penalities, My husband Illness has caused great

homitship and the payment of \$ 550.00 is beyond my needs. It their are any questions

Please (All (954) 772-3619

Sincerely Hale Goldberg (MRS. JALK Goldberg)