

**FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00**

**FILED**  
**May 06 1998 8:00am**  
**Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
 Secretary of State  
 DIVISION OF CORPORATIONS

**DOCUMENT # P97000000852 (8)**  
 1. Corporation Name  
**BRICKELL CLEANERS, INC.**



Principal Place of Business Mailing Address

**120 SW 13TH ST MIAMI FL 33130**      **120 SW 13TH ST MIAMI FL 33130**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21	22	26	27	01/03/1997	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
City & State		City & State		65-0717999	
Zip	Country	Zip	Country	Applied For	
24	25	29	30	Not Applicable	
9. Name and Address of Current Registered Agent				5. Certificate of Status Desired	
<b>FIGUEROA, ANTONIO JR.</b> <b>1450 NW 102ND WAY</b> <b>CORAL SPRINGS FL 33071</b>				<input type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution	
				<input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current-year Intangible Personal Property Tax due June 30.	
				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
<b>FIGUEROA, ANTONIO JR.</b> <b>1450 NW 102ND WAY</b> <b>CORAL SPRINGS FL 33071</b>				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				14850 SW 37th Ct.			
				84 City			
				MIRAMAR		FL 85 Zip Code	
				33027			

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: *Antonio Figueroa*      *Antonio Figueroa*      DATE: 4/27/97

(Signature, typed or printed name of registered agent and the Corporation) (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	FIGUEROA, ANTONIO JR.		1.2 NAME		
STREET ADDRESS	9017 SW 23RD LANE		1.3 STREET ADDRESS	14850 SW. 37th Ct	
CITY-ST-ZIP	MIAMI FL 33185		1.4 CITY-ST-ZIP	MIRAMAR, FL 33027	
TITLE	STD	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	FIGUEROA, ANTONIO		2.2 NAME		
STREET ADDRESS	9017 SW 23RD LANE		2.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33185		2.4 CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

14. I hereby 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 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 changed, or in an attachment with an address.

SIGNATURE: *Antonio Figueroa*      *Antonio Figueroa*      DATE: 4/27/97      (305) 854-3035

(Signature and typed or printed name of signing officer or director)

CR2E034 (10/97)