

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

FILED
Oct 16 1998 8:00am
Secretary of State

DOCUMENT # **P97000004565 (2)**

1. Corporation Name
DRYCLEAN AMERICA, INC.



Principal Place of Business
**C/O M. PATRICK
1141 KANE CONCOURSE
BAY HARBOR ISLAND FL 33154**

Mailing Address
**C/O M. PATRICK
1141 KANE CONCOURSE
BAY HARBOR ISLAND FL 33154**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/15/1997

4. FEI Number

65-0773896

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution



\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.



Yes



No

2. Principal Place of Business

21 1406 S.E. 17th Street

Suite, Apt. #, etc.

**22 City & State
Ft. Lauderdale FL**

23 Zip 33316 County Broward

24 33316 25 Broward

2a. Mailing Address

26 1406 S.E. 17th Street

Suite, Apt. #, etc.

**27 City & State
Ft. Lauderdale FL**

28 Zip 33316 County Broward

29 33316 30 Broward

9. Name and Address of Current Registered Agent

**PATRICK, MARTY ESQUIRE
MARTIN HOWARD PATRICK P.A.
1141 KANE CONCOURSE
BAY HARBOR ISLAND FL 33154**

10. Name and Address of New Registered Agent

**81 Name
Michael Fundiller**

**82 Street Address (P.O. Box Number is Not Acceptable)
1406 S.E. 17th Street**

83

**84 City
Ft. Lauderdale**

FL

85 Zip Code

33316

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 **Michael Fundiller**
Signature and printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

10/13/98

12. OFFICERS AND DIRECTORS

TITLE **D** ☐ DELETE

NAME **FUNDILLER, MIKE**
STREET ADDRESS **C/O M. PATRICK, 1141 KANE CONCOURSE**
CITY-ST-ZIP **BAY HARBOR ISLAND FL 33154**

TITLE **D** ☒ DELETE

NAME **MARLIN, RICHARD**
STREET ADDRESS **C/O M. PATRICK, 1141 KANE CONCOURSE**
CITY-ST-ZIP **BAY HARBOR ISLAND FL 33154**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

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 on an attachment with an address.

SIGNATURE **Michael Fundiller Pres**

9/24/98

954-426-1128

CR2E034 (5/98)