2005 FOR PROFIT CORPORATION

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

Apr 29, 2005 8:00 am Secretary of State **ANNUAL REPORT DOCUMENT # P97000008016** 04-29-2005 90294 050 ***150.00 1. Entity Name JOLIÉ CLEANERS & LAUNDRY, INC. Mailing Address Principal Place of Business 3911 WEST WATERS AVENUE 3911 WEST WATERS AVENUE TAMPA, FL 33614 TAMPA, FL 33614 04212005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2967198 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CHANGE, BONG KEUN DO NOT WRITE 3911 WEST WATERS AVENUE TAMPA, FL 33614 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2005 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. TITLE CHANG, BONG KEUN NAME STREET ADDRESS 3911 WEST WATERS AVENUE CITY-ST-ZIP TAMPA, FL 33614 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all exter like empowered.

SIGNATURE AND TYPED OR PRINTED MAME OF SIGNING OFFICER OR DIRECTOR

4-15-05

Daytime Phone #

FILED