## FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## FILED

| - DINITORIN BUSINESS REPUR   | KI (UBK)   |
|--|--|
| DOCUMENT #  1. Entity Name   | 02 HAY 22 PH 2: 53   |
| J.C. DRY CLEANING EQUIF  | PMENT IN   |
| 1990000009411  | TO THE PROPERTY OF A STREET TO SERVICE TO SE |
| DO NOT WRITE IN THIS :   |  |
|  |  |
| 2. Principal Place of Business  3. Mailing Address  6644 Imperial Oak Lane   | Impérial Oak Lane  |
| Suite, Apt. #, etc. Suite, Apt. #, etc.  | DO NOT WRITE IN THIS SPACE   |
| City & State Orlando, TL- Orlando  | do , FL         4. FEI Number         Applied For Not Applicable   |
| 32B19 US 32B19   | Country  5. Certificate of Status Desired Fee Required   |
|  | 7. Name and Address of Current Registered Agent  |
| DO NOT WRITE   | Name DAVID FONG  |
|  | Street Address (P.O. Box Number is Not Acceptable)   |
| IN THIS SPACE  | 1221 E. Robinson St.   |
|  | City Oylando FL Zip Code 32801   |
| 8. The above named entity submits this statement for the purpose of changing   |  |
| The Form   | -11.   |
| SIGNATURE Signature, typed or printed name of registered agent and title if applicable.  | (NOTE: Registered Apont signature required when reinstatung)  DATE   |
| Tax filing requirement and elects to do so.  After M   | I - May 1 Fee is \$150.00 May 1, Fee is \$550.00  10. Election Campaign Financing St.00 May Be Added to Fees Trust Fund Contribution.  |
| Make Check Pay   | ayable to Department of State Irust Fund Contribution.   Added to Fees   |
| 11. OFFICERS AND DIRECTORS   | TITLE  |
| NAME Yi, Jin   | 9000056931992  |
| CITY-ST-ZIP Orlando FL 32B19   | STREET ADDRESS -06/05/0201057018 CITY: ST-ZIP *****300.00 *****300.00 !  TITLE NAME  |
| TITLE Y D  | THIE   |
| STREET ADDRESS 6644 Imperial Oak Lane  | NAME   |
| CITY-SI-ZIP Orlando, FL 32819  | CITY-ST-ZIP to the state of the |
| TUTE /   | TITLE  |
| STREE! ADDRESS   |  |
| CITY-ST-ZIP  | CITY-ST-ZIP DO NOT WRITE   |
| VAME   | IN THIS SPACE  |
| STREET ADDRESS-  | - STREET ADDRESS   |
| TITLE  | CITY: ST-ZIP  TITLE  |
| NAME   | NAME   |
| STREET ADDRESS  CITY-ST-ZIP  | STREET ADDRESS CITY ST-ZIP   |
| TILE   | TITLE 1  |
| VAME<br>STREET ADDRESS   | NAME   |
| ZITY-SI-ZIP  | STREET ADDRESS CITY-ST-ZIP   |
| 3. Thereby certify that the information supplied with this filing does not qualify indicated on this report or supplemental report is true and accurate and that of the corporation or the report is true. | of or the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information at my signature shall have the same legal effect as if made under oath; that I am an officer or director proof as required by:  One of the same legal effect as if made under oath; that I am an officer or director proof as required by:  |
| or the corporation of the receiver of trustee empowered to execute this repattachment with an address, with all other like empowered.  | sport as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or on an  |

## J.C. Dry Cleaning Equipment, Inc. 6644 Imperial Oak Lane Orlando, FL 32819

Division of Corporations Annual Reports Filings

P.O. Box 1500 Tallahassee, FL 32302-1500

May 1, 2002

Dear Sir/Madam,

Re: Document #: P99000069411

Entity Name: J.C. Dry Cleaning Equipment, Inc.

We are writing this letter to request a waiver of penalty associated with the filing of the 2001 Uniform Business Report. Due to a change in the mailing address last year, we were not aware of the filing problem last year and that the corporation has been dissolved until we did an online corporate search recently. We have enclosed a check in the amount of \$300 to cover the fees for 2001 and 2002. We have made changes to the mailing address on the enclosed UBR to insure that future filing of the report will be timely.

Thank you for your attention and assistance in this matter.

Yours truly,

Jin Yi

President