FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **S79026** **(8)**

1. Corporation Name
DIRTY LAUNDRY, INC.

Principal Place of Business
18401 US HIGHWAY 19 NORTH
CLEARWATER FL 34624-5013

Mailing Address
18401 US HIGHWAY 19 NORTH
CLEARWATER FL 34624-5013

3. Date Incorporated or Qualified: 09/10/1991
3a. Date of Last Report: 04/04/1995

2. Principal Place of Business
21 601 Clearwater Park Road
Suite Apt. #, etc.
22
City, & State
23 West Palm Beach, Florida
Zip 24 33401 Country 25 USA

2a. Mailing Address
26 601 Clearwater Park Road
Suite Apt. #, etc.
27
City, & State
28 West Palm Beach, Florida
Zip 29 33401 Country 30 USA

4. FEI Number: 59-3083373 [ ] 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 has liability for intangible tax under s. 199.032, Florida Statutes [ ] Yes [X] No

9. Name and Address of Current Registered Agent
PAXSON, DEVON
18401 US HWY #19, NORTH
CLEARWATER FL 34624

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable) 601 Clearwater Park Road
83
84 City West Palm Beach FL 85 Zip Code 33401

11. Pursuant to the provisions of Sections 607.0502 and 607.0505, 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: Registered Agent Signature required before filing — DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	P/D [X] Change [ ] Addition
NAME	PAXSON, DEVON W.	1.2 NAME	Devon W. Paxson
STREET ADDRESS	18401 U.S. HWY. 19 NORTH	1.3 STREET ADDRESS	601 Clearwater Park Road
CITY, ST, ZIP	CLEARWATER FL	1.4 CITY, ST, ZIP	West Palm Beach, Florida 33401
TITLE	STD [ ] DELETE	2.1 TITLE	S/T/D [X] Change [ ] Addition
NAME	PAXSON, LOWELL W.	2.2 NAME	Lowell W. Paxson
STREET ADDRESS	18401 U.S. HWY. 19 NORTH	2.3 STREET ADDRESS	601 Clearwater Park Road
CITY, ST, ZIP	CLEARWATER FL	2.4 CITY, ST, ZIP	West Palm Beach, Florida 33401
TITLE	[ ] DELETE	3.1 TITLE	[ ] Change [ ] Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY, ST, ZIP		3.4 CITY, ST, ZIP	
TITLE	[ ] DELETE	4.1 TITLE	[ ] Change [ ] Addition
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		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY, ST, ZIP		5.4 CITY, ST, ZIP	
TITLE	[ ] DELETE	6.1 TITLE	[ ] Change [ ] 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 is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: Devon Paxson President 1/30/96 (407) 659-4122
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone
Devon W. Paxson, President, Director

CR2E034 (12/95)