

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
MAY 31 1995

DOCUMENT # **V73897** (3)

1. Corporation Name

THE NEIGHBORHOOD DRY CLEANING COMPANY, INC.

Principal Place of Business

3000 NW 42ND AVE., BLDG. B
STE. 109
COCONUT CREEK FL 33068

Mailing Address

3000 NW 42ND AVE., BLDG. B
STE. 109
COCONUT CREEK FL 33068

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/23/1992

3a. Date of Last Report

05/01/1994

4. FEI Number

65-0378286

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 ☒ No

2. Principal Place of Business

21 2898 UNIVERSITY DR

Suite, Apt. #, etc.

22 SUITE 77

City & State

23 CORAL SPRINGS FL

Zip

Country

24 33065

25

2a. Mailing Address

26 2898 UNIVERSITY DR

Suite, Apt. #, etc.

27 SUITE 77

City & State

28 CORAL SPRINGS FL

Zip

Country

29 33065

30

9. Name and Address of Current Registered Agent

FRANKEL, ELVIN
3000 NW 42ND AVE.
BLDG. B, STE. 109
COCONUT CREEK FL 33068

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Signature of Agent or Certified Name of Registered Agent and Last Agent

Signature of Registered Agent (signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
PSTD
FRANKEL, ELVIN
3000 NW 42ND AVE., BLDG. B, STE. 109
COCONUT CREEK FL 33068

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 is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information included in the annual report or supplementary annual report is true and accurate and that my signature shall have the same legal effect as if made under oath. I am an officer or director of the corporation or the receiver or person empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this document, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF RECORDING OFFICER OR DIRECTOR

5/24/95 (305) 340-5855
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