

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # V73897 (3)
1. Corporation Name
THE NEIGHBORHOOD DRY CLEANING COMPANY, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

97 JUL 28 AM 10:41



Principal Place of Business 2898 UNIVERSITY DR SUITE 77 CORAL SPRINGS FL 33065 US	Mailing Address 2898 UNIVERSITY DR SUITE 77 CORAL SPRINGS FL 33065 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 75 Northeast Federal Hwy. Suite, Apt. #, etc. 22 Suite 104 City & State 23 Delray Beach, FL Zip 24 33483	2a. Mailing Address 26 75 Northeast Federal Hwy. Suite, Apt. #, etc. 27 Suite 104 City & State 28 Delray Beach, FL Zip 29 33483	3. Date Incorporated or Qualified 10/23/1992	3a. Date of Last Report 05/01/1996	4. FEI Number 65-0378286	Applied For Not Applicable	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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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 6420 Boca Del Mar #304 84 City Boca Raton 85 Zip Code FL 33433
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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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PSTD	1.1 TITLE	address
NAME	FRANKEL, ELVIN	1.2 NAME	
STREET ADDRESS	3000 NW 42ND AVE., BLDG. B, STE. 109	1.3 STREET ADDRESS	6420 Boca Del Mar #304
CITY-ST-ZIP	COCONUT CREEK FL 33068	1.4 CITY-ST-ZIP	Boca Raton, FL 33433
TITLE		2.1 TITLE	
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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 _____ 1/25/97 (561) 272-2797

CR2E034 (4/97)