PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

FILED Mar 04, 1999 8:00 am Secretary of State **Katherine Harris**

03-04-1999 90156 049 ***150.00



DOCUMENT # S35876 1. Corporation Name	
SWIFTY COIN LAUNDRY CORPORATION	N

Principal Place of Business

Mailing Address

304 N. CRESCENT DR. HOLLYWOOD FL 33021 HOLLYWOOD FL 33021								· 			
					. 3	•	rated or Qualife	RITE IN THIS S	SPACE	7	
						03/05/199	-1		- 		
2. Principal Pl	lace of Business	2a. Mailing Address	NI VI	1 - Maria		I. FEI Number	20			pplied For	
21 d550 S	S.N. 106th Terrace		<u> 401 r</u>	Temo	<u> 14e</u>	65-02487)b			ot Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5	5. Certifcate of	Status Desired	· 🗅	+	Additional (lequired	
City & State	Honda	28 DOWN CFLT	phd	a	6	3. Election Carr Trust Fund C	paign Financing ontribution	, _□		May Be to Fees	
24 333,2	Country U 25 / 15 A	zip 33324 30	Country	ISA	8	3. This corporation Personal Pro	tion owes the cu perty Tax.	rrent year Inta	ngible Yes	□No	
	9. Name and Address of Current	Registered Agent			10	D. Name and A	ddress of New	Registered A	<u>ligent</u>		
		··· ·	81	Name							
	B, GEORGE M.		82 Street Address (P.O. Box Number is Not Acceptable)								
	N. CRESCENT DR.		"	as office Addiess (i.e. box Addiess to Hot Neeshanie)							
HOL	LYWOOD FL 33021		83				•				
			84	City				FL	85 Zip	Code	
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes,	the abov	e-named cor	orporati	on submits this	statement for th	e purpose of o	changing it	s registered	
office or r	egistered agent, or both, in the State o m familiar with, and accept the obligati	f Florida. Such change was auth	orized by	the corporat	ation's i	board of directo	rs. I hereby acc	ept the appoin	tment as r	egistered	
SIGNATURE		Alore D		nt signature requi	eaddea.	instating)		DATE			
	Signature, typed or printed name of registered agent OFFICERS AND		13.	nt signature requi	Titled wilet		HANGES TO C		D DIRECT	ORS IN 12	
12.	D OFFICERS AND	DELETE	1.1 TITLE	Т	Vr	TSVOON	+	<u></u>	Change	Addition	
TITLE	DEEB, GEORGE M.		1.2 NAME	\ 1	7		ماکله	•	7.4	_	
NAME	304 N. CRESCENT DR.			T ADORESS	UL		Matta.	TONTH	Co	(
STREET ADDRESS	HOLLYWOOD FL			i	23	30 2 M	orce londa	2227	ĩ	ĺ	
CITY-ST-ZIP	HOLLIWOODIL	☐ DELETE	1.4 CITY-5	1-21	$-\epsilon$	XXVIC 11	WHUE	LACUL	Change	☐ Addition	
TITLE			2.2 NAME	. /	· ·		_ • • • •				
NAME				TADDRESS							
STREET ADDRESS			2.3 3 REE	l l						· \	
CITY-ST-ZIP		☐ DELETE	3.1 TITLE	51-217					Change	Addition	
TITLE		_ price	3.2 NAME						•	_	
NAME			l	TADORESS		٠				{	
STREET ADDRESS				Ī						·	
CITY-ST-ZIP		☐ DELETE	3.4. CITY-S 4.1 TITLE	51-ZIP		-			Change	Addition	
TITLE			4. 2 NAME							_ (
NAME				TADDRESS							
STREET ADDRESS			4.4 CITY-S							į	
CITY-ST-ZIP TITLE		☐ DELETE	5.1 TITLE	-					Change	☐ Addition	
			5.2 NAME						_ •		
NAME ATTEC ADDRESS		:	5.3 STRFF	TADDRESS						ł	
STREET ADDRESS			5.4 CITY-S							ļ	
CITY-ST-ZIP			6.1 TITLE						Change	Addition	
TITLE			6.2 NAME								
NAME				† ADDRESS						Į	
STREET ADDRESS			6.4 CITY-S	1							
CITY-ST-ZIP			J O11 1-0								

14. 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 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, with all other like empowered.

SIGNATURE: