

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V36555

FILED  
Jan 10, 2010  
Secretary of State

**Entity Name:** BIOHAZARD LAUNDRY SERVICES, INC.

**Current Principal Place of Business:**

18908 PLACE MARQUETTE  
LUTZ, FL 33558

**New Principal Place of Business:**

13785 N. NEBRASKA AVE.  
TAMPA, FL 33613

**Current Mailing Address:**

18908 PLACE MARQUETTE  
LUTZ, FL 33558

**New Mailing Address:**

PO BOX 274086  
TAMPA, FL 33688

**FEI Number:** 59-3125305

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

KREKORIAN, MARK  
18908 PLACE MARQUETTE  
LUTZ, FL 33558 US

**Name and Address of New Registered Agent:**

KREKORIAN, MICHAEL  
13785 N. NEBRASKA AVE.  
TAMPA, FL 33613 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: MICHAEL KREKORIAN

01/10/2010

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PTD  
Name: KREKORIAN, MICHAEL  
Address: 13785 N. NEBRASKA AVE.  
City-St-Zip: TAMPA, FL 33613

Title: VPD  
Name: KREKORIAN, MARK  
Address: 18908 PLACE MARQUETTE  
City-St-Zip: LUTZ, FL 33558

Title: SD  
Name: KREKORIAN, MICHELE  
Address: 18908 PLACE MARQUETTE  
City-St-Zip: LUTZ, FL 33558

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: MICHAEL KREKORIAN

PRES

01/10/2010

Electronic Signature of Signing Officer or Director

Date