

2000 UNIFORM BUSINESS REPORT (UBR)

1 of 3

DOCUMENT # 431732

1. Entity Name

COMMERCIAL LAUNDRY REPAIRS, INC.

FILED

00 JUL 18 AM 8:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business 3427 S.W. 64 AVE MIAMI FL 33155	Mailing Address 3427 S.W. 64 AVE MIAMI FL 33155
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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City & State	City & State	4. FEI Number 59-1485887	Applied For Not Applicable
Zip	Country	Zip	Country

6. Name and Address of Current Registered Agent RHODES, JOHN 3427 S W 64TH AVE MIAMI FL 33155	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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8. 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input type="checkbox"/>	FILE NOW!!! FEE IS \$550.00 After SEPTEMBER 13, 2000 Min. will be \$750.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P RHODES, JOHN 3427 SW 64 AVE MIAMI FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S RHODES, ANITA 3427 SW 64 AVE MIAMI FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	600003349678-08/08/00-01070-017 ***150.00 ***150.00 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Seen attached for signature
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR _____ Date _____ Daytime Phone # _____

CR2E034 (5/00)

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Reference to Document # 431732

Sent on 4/13/00.

I ALWAYS pay on time, I Am sending copy with another
check IF The other check form turns up Please
send it BACK TO ME

Thank you

John Rhodes

P.S. I Am Having A little Trouble with Flopy Drive
That is why it is so fuzzy.

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2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 431732

COMMERCIAL LAUNDRY REPAIRS, INC.

1. Principal Office and Business Address
3427 S.W. 64 AVE
MIAMI FL 33155

2. Mailing Address
3427 S.W. 64 AVE
MIAMI FL 33155-3105

3. Principal Office of Business

4. Mailing Address



5. Filing Number 11858732

6. Filing Number

7. Filing Number

8. Filing Number

9. Filing Number

10. Filing Number 59-1485887

11. Filing Number

12. Filing Number

13. Filing Number

14. Filing Number

15. Filing Number

16. Filing Number

17. Filing Number

18. Filing Number

19. Name and Address of Current Registered Agent

20. Name and Address of New Registered Agent

RHODES, JOHN
3427 S.W. 64 AVE
MIAMI FL 33155

21. This document is submitted to the Department of Banking and Finance for the purpose of changing the registered agent of the corporation.

22. Filing Number

23. Filing Number

24. Filing Number

25. Filing Number

26. This document is submitted to the Department of Banking and Finance for the purpose of changing the registered agent of the corporation.

27. Filing Number

28. Filing Number

29. Filing Number

OFFICER AND DIRECTOR		ADDITIONAL PERSONS TO OFFICERS AND DIRECTORS	
NAME	ADDRESS	NAME	ADDRESS
RHODES, JOHN	3427 SW 64 AVE MIAMI FL		
RHODES, ANITA	3427 SW 64 AVE MIAMI FL		

30. This document is submitted to the Department of Banking and Finance for the purpose of changing the registered agent of the corporation.

SIGNATURE: *John Rhodes* 4/13/00

John Rhodes