

2000 UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT # 492034

1. Entity Name

MARISE LAUNDRY & DRY CLEANERS, INC.

FILED
Aug 30, 2000 8:00 am
Secretary of State

05-24-2000 90195 046 ***150.00

Principal Place of Business Mailing Address
 1866 NW 36TH ST. 1866 NW 36TH ST.
 MIAMI FL 33142-5441 MIAMI FL 33142-5441

2. Principal Place of Business Mailing Address
 1866 NW 36 Street

Suite, Apt. #, etc. Suite, Apt. #, etc.
 Miami

City & State City & State
 Florida

Zip Country Zip Country
 MIAMI FL 33142



DO NOT WRITE IN THIS SPACE

4. FEI Number **59-1637340** Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 RODRIGUEZ, ESDRAS A.
 10600 S.W. 60 STREET
 MIAMI FL

7. Name and Address of New Registered Agent
 Name **MARISE RODRIGUEZ**
 Street Address (P.O. Box Number is Not Acceptable)
 1866 NW 36 Street
 ESDRAS A. RODRIGUEZ, JR.
 City **MIAMI** FL Zip Code **33142**

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 **MARISE RODRIGUEZ** *Marian Rodriguez* 4/29/00
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
 (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P RODRIGUEZ, ESDRAS A. SR. 10600 S.W. 60 ST. MIAMI FL 33173 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP RODRIGUEZ, SEGUNDA 10600 S.W. 60 ST. MIAMI FL 33173 <input type="checkbox"/> Delete <i>Change Name</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition ESDRAS RODRIGUEZ SR. PRESIDENT
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition MARISE RODRIGUEZ SECRETARY
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition ESDRAS A. RODRIGUEZ JR VICE PRESIDENT
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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: **SIGNATURE** *Marian Rodriguez* 8/14/00 (305) 675-4911-12
Signature and typed or printed name of signing officer or director Date Daytime Phone #

CFR2E034 (9/99)