

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 613097 (5)

1. Corporation Name

A-ONE COIN LAUNDRY EQUIPMENT COMPANY

Principal Place of Business

20351 NE 20TH PLACE  
NORTH MIAMI BEACH FL 33179

Mailing Address

20351 NE 20TH PLACE  
NORTH MIAMI BEACH FL 33179



2. Principal Place of Business

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

9. Name and Address of Current Registered Agent

HERTZ, STEPHEN G  
300 71ST ST  
MIAMI BEACH FL 33141

3. Date Incorporated or Qualified

03/15/1979

3a. Date of Last Report

04/11/1995

4. FEI Number

59-1906614

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☒ Yes

☐ No

10. Name and Address of New Registered Agent

81

Name

RONALD H. KAISER

82

Street Address (P.O. Box Number is Not Acceptable)

20351 NE 20TH PLACE

83

84

City

N Miami Beach

FL

85

Zip Code

33179

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 607.0503, Florida Statutes.

SIGNATURE

*Ronald H. Kaiser*

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE

D/P

☐ DELETE

NAME

KAISER, RONALD H

STREET ADDRESS

20351 NE 20TH PLACE

CITY- ST- ZIP

N MIAMI BEACH FL

TITLE

~~TD~~

☒ DELETE

NAME

~~BERNSTEIN, RONALD~~

STREET ADDRESS

~~3000 S LAKE TERR~~

CITY- ST- ZIP

~~MIRAMAR FL~~

TITLE

S

☐ DELETE

NAME

DALE KAISER

STREET ADDRESS

20351 NE 20th PLACE

CITY- ST- ZIP

N. MIAMI BEACH, FL. 33179

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY- ST- ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY- ST- ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY- ST- ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

☐ Change

☒ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY- ST- ZIP

33179

2.1 TITLE

☐ Change

☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY- ST- ZIP

3.1 TITLE

☐ Change

☒ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY- ST- ZIP

4.1 TITLE

☐ Change

☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY- ST- ZIP

5.1 TITLE

☐ Change

☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY- ST- ZIP

6.1 TITLE

☐ Change

☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY- ST- ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

*Ronald H. Kaiser*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RONALD H. KAISER 1/18/96

Date

705-932-1393

Daytime Phone #

CR2E034 (12/95)