

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 10, 2001 8:00 am
Secretary of State

07-10-2001 90110 004 ***150.00

DOCUMENT # 613097

1. Entity 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**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1906614

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

**KAISER, RONALD H
 20351 NW 20 PLACE
 N MIAMI BEACH FL 33179**

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

Signature, typed or printed name of registered agent and title if applicable.

(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) ☐

**FILE NOW!!! FEE IS \$550.00
 After September 12, 2001 Fee will be \$750.00
 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☐ Delete
 NAME **KAISER, RONALD H**
 STREET ADDRESS **20351 NE 20TH PLACE**
 CITY-ST-ZIP **N MIAMI BEACH FL**

TITLE **DIRECTOR** ☐ Change ☒ Addition
 NAME **DALE KAISER**
 STREET ADDRESS **20351 NE 20 PLACE**
 CITY-ST-ZIP **MIAMI FL 33179**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **DIRECTOR** ☐ Change ☒ Addition
 NAME **MICHAEL KAISER**
 STREET ADDRESS **20351 NE 20 PLACE**
 CITY-ST-ZIP **MIAMI FL 33179**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **Agency DIRECTOR** ☐ Change ☒ Addition
 NAME **NANCY KAISER**
 STREET ADDRESS **20351 NE 20 PLACE**
 CITY-ST-ZIP **MIAMI FL 33179**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **DIRECTOR** ☐ Change ☒ Addition
 NAME **PAMELA ROSENTHAL**
 STREET ADDRESS **5156 SW 32 AVE.**
 CITY-ST-ZIP **FT. LAUD. FL 33312**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 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 Required
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7-5-01

CR2E034 (5/01)

*Attachment
613097
772797*
A-One Coin Laundry Equipment Co.

Serving You With Coin-Operated Laundry Equipment

20351 N. E. 20th PLACE

MIAMI, FLORIDA 33179

Doc # 613097

7-5-01

To Whom it may concern,

As per our conversation on the telephone
the other day with your representative,
she had advised me since we had
not received the documents previously,
that we should send in the original
fee of \$150 dollars.

Yours truly,
Ronald H. Fawcett