

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 683118

FILED
Mar 12, 2008
Secretary of State

Entity Name: COMMERCIAL LAUNDRIES OF WEST FLORIDA, INC.

Current Principal Place of Business:

C/O AINSLEE R. FERDIE
717 PONCE DE LEON BLVD., SUITE 223
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

5122 W. KNOX ST.
TAMPA, FL 33634 US

New Mailing Address:

5122 W. KNOX STREET
TAMAP, FL 33634

FEI Number: 59-2027251

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FERDIE, AINSLEE R.
717 PONCE DE LEON BLVD.
SUITE 223
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ALBANESE, MICHAEL,
Address: 5122 W. KNOX STREET
City-St-Zip: TAMPA, FL

Title: VPD () Delete
Name: STEWART, JACK,
Address: 8510 N.W. 56TH ST.
City-St-Zip: MIAMI, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MICHAEL R. ALBANESE

PRES

03/12/2008

Electronic Signature of Signing Officer or Director

_____ Date