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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # G50205

(5)

KEY WEST LINEN & LAUNDRY INC.

FILED	
May 07 1997 8:00am	1
Secretary of State	

Principal Plac 955 SW 8TH S MIAMI FL 33130 US	T	Mailing Address 955 SW 8TH ST MIAMI FL 33130-3705 US		3. Date Incorporated or Qualified 3a. Date of Last Report			
		,			07/18/1983	05/01/1996	
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number 59-2347139		oplied For
Suite, Apl.	#, etc.	Suite, Apt. #, etc.				- \$8.75	ot Applicable Additional
22		27			Certificate of Status Desired	Fee Re	
City & State		City & State		Election Campaign Financing Trust Fund Contribution	oution Added to Fees		
Zip 24	Country	Zip	Country	<i>'</i>	8. This corporation has liability t		. 199.032,
24	25 25 Name and Address of Currer	29 nt Registered Agent	30]		10. Name and Address of New	Yes No	
SAN	CHEZ, MAX		81	Name	IV, Marie and Address of feet	nogistored Agent	
	S W 8TH ST		82	Street Add	ress (P.O. Box Number is Not Accep	deblo)	
	AI FL 33130			GILCH AGG	meda (r. cz. boż riomber is niot Accep	пасле)	:
			83				
			84	City		85 Zip	Code
44 Duramant	to the provisions of Spotians 607 00	10 mad 007 1000 Harida Crata	no the chan		poration submits this statement for th	FL FL FL FL FL FL FL FL	
office or r	egistered agent, or both, in the State m familiar with, and accept the oblig	of Florida, Such change was a	autborized by	y the corpora	poration submits this statement for the ition's board of directors. I hereby ac	e purpose of changing it cept the appointment as	s registered registered
SIGNATURE.	Signature, typed or printed hame of require ed age	and the second second			ored when reinstating)		
12.		D DIRECTORS	13.	an eig wate redu	ADDITIONS/CHANGES TO OF	EICERS AND DIRECTOR	RS IN 12
TITLE	DP	DELETE	1:1011			☐ Change	Addition
NAME	SANCHEZ, MAX		1.2 NAME				
STREET ADDRESS	942 S W 8TH ST		1.3 STH[F]	ADDRESS			
CITY-ST-ZIP	MIAMI, FL 00000		1.4 CITY - S	1-7-P			
TITLE	1		2 ! 1ITLE			☐ Change	Addition
NAME STREET ADDRESS			2.2 NAME	ADADOGO			
CITY-ST-ZIP			2.3 STREET ADDRESS 2.4 CHY-ST-ZIP				
TITLE			3.1 1/116	51.711		Change	Addition
NAME			3.2 NAME			_ •	
STREET ADDRESS			3 3 STREET	ADDRESS			
CITY-ST-ZIP			34 CITY-	\$1-2IP			
TITLE		☐ DELETE	4.1 THLE			Change	Addition
NAME			4 2 NAME		,		
STREET ADDRESS			4.3 STREET				
CITY-ST-ZIP TITLE	554.75		4.4 City S 5.1 Title	iF-ZIP		☐ Change	Addition
NAME			5.2 NAM(onange	Land 1400/HOH
STREET ADDRESS			53 STREET	ADDRESS			
CITY-ST-ZIP			54 CHY-S				
TITLE			6 1 TITLE		Change Addition		
NAME			6.2 NAML				
STREET ADDRESS		. •	63 STREET	AUDRESS			
CITY-ST-ZIP	ov portify that the information	of many spirit fit was the contract of	64 CITY - S		d Deather 140 02/00/0 51 11 50 51	11 11	
informatio	by certify that the information supplied in indicated on this annual report or s fficer or director of the corporation or in Block 12 or Block 13 if changed, o	supplemental åenual report is tr the recever ∡r kustoe emigen	ue and accu	rinpuon state ura e and tha sure this repo	d in Section 119.07(3)(i), Florida Stati I my signature shall have the same lo it as required by Chapter 607, Florid	aces i further certify that egal effect as if made und a Statutes; and that my r	me der oath; that iame