FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



DOCUMENT # G59711

CONDO COIN LAUNDRY, INC.

(3)

FILED Apr 16 1997 8:00am FLORIDA DEPARTMENT OF STATE Secretary of State Secretary of State DIVISION OF CORPORATIONS



Principal Place	o of Business	Mailing Address			I BALLENEN BARK BARKI BARKI BARKI 1801
881 N BARFIELD DRIVE 881 N BARFIEL				·	
MARCO ISLAND	FL 33907	MARCO ISLAND FL 34145-2	334		
				3. Date Incorporated or Qualified 3a. Date of Last Report 09/15/1983 03/25/1996	
2. Principal P	lace of Business	2a. Mailing Address	····	4. FEI Number	Applied For
1]	,	26		59-2327599	Not Applicable
Suite, Apt	#, etc	Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	e	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Ζip	Country	Zip	Country	8. This corporation has liability for in	
<u>]</u>	25	29	30		Yes No
	9. Name and Address of Cu	rrent Registered Agent		10. Name and Address of New Reg	stered Agent
SCU	DERI, SALVATORE C.		81 Name		
	n Collier BLVD		82 Street A	Address (P.O. Box Number is Not Acceptab	le)
MAR	ÇO ISLAND FL 33937				·
	· .		83		
	•		84 City		85 Zip Code
				corporation submits this statement for the p location's board of directors. I hereby accep	FL T
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	
	PTSD	☐ DELETE	1.1 TITLE		Change Addition
MAME	Berry, Barbara		1.2 NAME		
GIREFI ADDRESS	881 N BARFIELD DR		1.3 STREET ADDRESS		
11 - S3 - 21P	MARCO ISLD FL	DP-FFF	1.4 CITY - ST - ZIP		T Access T Address
ITLE		DELETE	2.1 TITLE		Change Additi
IAM?			2.2 NAME		
STHEET ADORESS			2.3 STREET ADDRESS		
DIY+ST+ZiP BU(F		DELETE	2 4 CiTY-ST-ZIP 31 TITLE	The state of the s	Change Addition
IAME			3.2 NAME		
STREET ADDRESS	<u> </u>		3 3 STREET ADDRESS		
OTY-S1-7-2			3.4. CITY+ST-ZIP		
ITLE		DELETE	4.1 TITLE		Change Additi
3M4I			4. 2 NAME		
GREET ADORESS			4.3 STREET ADDRESS		
PTY-S1-ZP		DELETE	4.4 C/TY-\$T-Z/P		Change Additi
HTLE ·····		☐ nefelt	5.1 TITLE		F1 Ownings F1 World
MME STREET ARRESTES			5.2 NAME		
TREET ADORESS			5.3 STREET ADDRESS		
DITY - ST - ZIP TILE		DELETE	5.4 CITY-ST-ZIP 6 1 TITLE		Change Additi
IAM!		F- Section	6.2 NAME		
vami Street adoress			63 STREET ADDRESS		
CITY - S1 - ZIF			6 4 CiTY-ST-ZiP		
JULY 84 : 70F	i .		■ 04 0H11*3F*ZIP* [

14. I do 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 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 12 or Block 12 or on an attachment with an address.