## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L46212

FILED Feb 15, 2005 Secretary of State

Entity Name: LAUNDRY EQUIPMENT COMPANY #1, INC.	
Current Principal Place of Business:	New Principal Place of Business:
13090 NW 27 AVE OPA LOCKA, FL 33014	
Current Mailing Address:	New Mailing Address:
100 S BIRCH APT 2702 FORT LAUDERDALE, FL 33316	
FEI Number: 65-0182613 FEI Number Applied For ( ) FEI Nu	mber Not Applicable ( ) Certificate of Status Desired ( )
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:
MILGRAM, SCOTT 100 S. BIRCH ROAD APT. 2702 FT. LAUDERDALE, FL 33316 FL	MILGRAM, SCOTT 100 S. BIRCH ROAD APT. 2702 FT. LAUDERDALE, FL 33316 US
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: SCOTT MILGRAM	02/15/2005
Electronic Signature of Registered Agent	Date
Election Campaign Financing Trust Fund Contribution ( ).	
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:
Title:         DPV         ( ) Delete           Name:         MILGRAM, SCOTT,           Address:         100 S BIRCH RD # 2702           City-St-Zip:         FORT LAUDERDALE, FL 33316	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title:         ST () Delete           Name:         MILGRAM, SCOTT,           Address:         100 S BIRCH RD # 2702           City-St-Zip:         FORT LAUDERDALE, FL 33316	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: VP ( ) Delete Name: MILGRAM, JUDY	Title: ( ) Change ( ) Addition Name:

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

Address:

City-St-Zip:

SIGNATURE: SCOTT MILGRAM DPV 02/15/2005

100 S BIRCH RD # 2702

FORT LAUDERDALE, FL 33316

Address:

City-St-Zip: