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PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L50147 SUN VILLAGE COIN LAUNDRY, INC. (2)

FILED Mar 25 1998 8:00am Secretary of State

	a of Rusinoss	Mailing Address			— { IRACIDII ODI DIVII DOIDI HEKIT				
Principal Place of Business Mailing Address WHENRY O. GERVAIS WHENRY O. GERVAIS									
4579 N. UNIVERSITY DR.			4579 N. UNIVERSITY DR.						
LAUDERHILL			LAUDERHILL FL 33351-4501			DO NOT WRITE IN THIS SPACE			
	_				 Date Incorporated or Qua 02/09/1990 	alified			
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number		A	plied For	
1		26			65-0179470		No.	ot Applicab	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desir	red 🔲		Additional equired	
City & State	C	City & State			6. Election Campaign Finan	icing	\$5.00	May Be	
3		28			Trust Fund Contribution		Added	to Fees	
Zıp	Country	Zφ	Country		8. This corporation owes or				
4	25	29	30		Personal Property Tax du] No	
	9. Name and Address of Curr	rent Registered Agent	81	N	10. Name and Address of N	lew Registered	Agent		
	rvais, Henry O.		°'	Name					
4579 N. UNIVERSITY DR. Lauderhill Fl			82 Street Ac		dress (P.O. Box Number is Not Acceptable)				
			83						
			84	City		FL	85 Zip	Code	
11. Pursuant	to the provisions of Sections 607.0	502 and 607.1508, Florida Sta	utes, the above	e-named cor	poration submits this statement for	or the purpose o	f changing i	ts registere	
office or re agent. I a	egistered agent, or both, in the Sta m familiar with, and accept the obl	ate of Florida. Such change wa ligations of, Section 607.0505,	s authorized by Florida Statutes	the corpora s.	ation's board of directors. I hereby	y accept the app	pointment as	registered	
SIGNATURE	Signature, based or country! transcript rate based	accord and tillo diagnosis while:	OTE Pogistored Age	of Bionelure rod	uired when reinstating)	DATE			
	Signature, typed or punted name of registered. OFFICERS A			ant Bignalure requ	uired when reinstating) ADDITIONS/CHANGES TO	DATE OFFICERS AN	D DIRECTOR	3S IN 12	
12.		ayon and till of applicable (N AND DIRECTORS	13.	ant Bignalure requ	uired when reinstating) ADDITIONS/CHANGES TO		DIRECTOR		
12.	OFFICERS A	AND DIRECTORS	13.	nt signature requ					
12. TITLE	OFFICERS A	AND DIRECTORS	13. 1.1 TITLE						
12. HTLE NAME STREET ADDRESS	OFFICERS A DPT GERVAIS, HENRY O.	AND DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STREET	ADDRESS					
12. Title Name Street address City-St-Zip	OFFICERS A DPT GERVAIS, HENRY O. 4579 N. UNIVERSITY DR.	AND DIRECTORS	13. 1.1 TITLE 1.2 NAME	ADDRESS				RS IN 12 Additi	
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