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**PROFIT CORPORATION** ANNUAL REPORT

1998



ELORIDA DEPARTMENT DE STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

**DOCUMENT #** L67977

STAR-BRITE LAUNDROMAT, INC.

(3)

## FILED May 14 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 71 E. INDIANTOWN RD 71 E. INDIANTOWN RD. JUPITER FL 33477 JUPITER FL 33477 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/23/1990 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 21 26 59-2629697 Not Applicable Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 30 Personal Property Tax due June 30. Yes 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name WHITE, CHARLES E 71 E. INDIANTOWN ROAD 62 Street Address (P.O. Box Number is Not Acceptable) JUPITER FL 33477 83 84 City 85 Zip Code 11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Signature, typed or preded name of registered agent and pre- Lappoinable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Addition Change TITLE 1.1 TITLE WHITE, VIRGINIA M NAME 1.2 NAME 322 AOLOA, APT. #304 STREET ADDRESS 1.3 STREET ADDRESS KAILUA HI 96734 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change TITLE 2.1 TITLE Addition WHITE, CHARLES E NAME 2.2 NAME 902 SOUTHWEST 20TH CT. STREET ADDRESS 23 STREET ADDRESS **DELRAY BEACH FL 33456** CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change ■ Addition TITLE 3.1 TITLE WHITE, ROMA NAME 3.2 NAM6 902 SOUTHWEST 20TH CT. STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP **DELRAY BEACH FL 33456** 3.4. CITY - ST - ZIP DELETE 4.1 TITLE Change Addition TITLE 4 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 51 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-S1-21P 5.4 CITY - ST- ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY - ST - ZIP CITY-ST-ZIP

14. Thereby 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 13 if changed, or on an attachment with an address