

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L67977

1. Entity Name
STAR-BRITE LAUNDROMAT, INC.

FILED
Jul 17, 2000 8:00 am
Secretary of State

07-17-2000 90085 001 ***158.75
07-17-2000 90085 002 ***550.00

Principal Place of Business
71 E. INDIANTOWN RD.
JUPITER FL 33477

Mailing Address
71 E. INDIANTOWN RD.
JUPITER FL 33477

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country

4. FEI Number 59-2629697
Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
WHITE, CHARLES E
71 E. INDIANTOWN ROAD
JUPITER FL 33477

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

8. 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ (See criteria on back)

FILE NOW!!! FEE IS \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	NAME	STREET ADDRESS	TITLE	NAME	STREET ADDRESS
PD	WHITE, VIRGINIA M	322 AOLOA, APT. #304	WHITE VIRGINIA M (ADDRESS)	7015 SE CUTLER TRAIL	STUART FL 34997
KAILUA HI 96734					
VSD	WHITE, CHARLES E	902 SOUTHWEST 20TH CT.	CHARLES E WHITE	7015 SE CUTLER TRAIL	STUART FL 34997
DELRAY BEACH FL 33456					
D	WHITE, ROMA	902 SOUTHWEST 20TH CT.	RICCO BROCKMAN	71 E INDIANTOWN RD	JUPITER FL 33477
DELRAY BEACH FL 33456					

13. I 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Virginia M White Virginia M White 7/9/00 561-747 3035
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #