## 2002 UNIFORM BUSINESS REPORT (UBR)

## Apr 26, 2002 8:00 am & Secretary of State M52105 DOCUMENT # 1. Entity Name FAST LAUNDRY, INC. Principal Place of Business Mailing Address 7720 SW 78TH STREET 1643 W FLAGLER STREET **MIAMI FL 33125 MIAMI FL 33143** US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State -City & State 4. FEI Number Applied For 59-2837733 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired $\Box$ Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BARBEITO, ANTONIO Street Address (P.O. Box Number is Not Acceptable) **7720 SW 78TH STREET** MIAMI FL 33143 City 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) П Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE Delete TITI F ☐ Change ☐ Addition BARBEITO, ANTONIO NAME NAME 7720 SW 78TH ST STREET ADDRESS STREET ADDRESS MIAMI FL 33143 CITY-ST-ZIP CITY-ST-ZIP **VTD** ☐ Delete TITLE TITLE ☐ Change ☐ Addition BARBEITO, MARIA E. NAME NAME STREET ADDRESS 7720 SW 78TH STREET STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33143** TITLE ☐ Delete TITLE Change ☐ Addition NAME BARBEITO-LOVETT, MARIA T. NAME STREET ADDRESS 7720 SW 28TH STREET STREET ADDRESS CITY-ST-ZIP MIAMI FL 33143 CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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

SIGNATURE: