2004 FOR PROFIT CORPORATION ANNUAL REPORT DOCUMENT # M53607 1. Entity Name FAST LAUNDRY NUM.2, INC. Principal Place of Business Mailing Address 809 SW 8 ST 7720 SW 78TH STREET MIAMI, FL 33130 US MIAMI, FL 33143 US

FILED Apr 08, 2004 08:00 AM Secretary of State



CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number Applied For 59-2812347 Applied For Not Applied For

59-2812347 | Not Applicable

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

6. Name and Address of Current Registered Agent
BARBEITO, ANTONIO
7720 SW 78TH STREET
MIAMI, FL 33143

DO NOT WRITE IN THIS SPACE

No Chg-P

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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE					
Odinava i Nama ai burga ai ighista an ahan ahan ahan ai ina ma han ai ina man ai ina mai					
	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.00	 Election Campaign Finance Trust Fund Contribution. 	ing 🔲	\$5.00 May Be Added to Fees	,
10.	OFFICERS AND DIREC	TORS			
THE NAME STREET ADDRESS CHY-ST-ZIP	VT BARBEITO, MARIA E. 7720 SW 78TH STREET MIAMI, FL 33143				l magaz const.
TILE NAME STREET ADDRESS GITY-ST-ZIP	P BARBEITO, ANTONIO 7720 SW 78TH STREET MIAMI, FL 33143				U00000106371 04/08/04-80012-025 15000
Title Name Street address City-St-Zip	S BARBIETO-LOVETT, MARIA T 7720 SW 78TH STREET MIAMI, FL 33143			DO	NOT WRITE
TITLE NAME STREET ADORESS CITY+ST-ZIP				IN .	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
THILE NAME STREET ADDRESS C/TY-SI-ZIP					
12. I hereby certify that the information supplied with this filling 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					

12. Hereby certify that the information supplied with this filling 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Maure Clience Dayles SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/31/04 305-592544