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FILED

May 04 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # M61196 (5)  
1. Corporation Name  
LITTLE HAITI COIN LAUNDRY, INC.



Principal Place of Business

% 600 FALCON AVE.  
MIAMI SPRINGS FL 33166

Mailing Address

C/O 465 S. ROYAL POINCIANA BLVD.  
APT 2A  
MIAMI SPGS FL 33166  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/21/1987

4. FEI Number

65-0009025

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 6505 N.E. 2ND AVE.

Suite, Apt. #, etc.

22 6P

City & State

23 MIAMI FLORIDA

Zip

24 33138

Country

25 USA

2a. Mailing Address

26 600 FALCON AVE

Suite, Apt. #, etc.

27

City & State

28 MIAMI SPRINGS, FL

Zip

29 33136

Country

30 USA

9. Name and Address of Current Registered Agent

GREGORY, URSULA M.

465 SOUTH ROYAL POINCIANA BLVD. 600 FALCON AVE  
MIAMI SPRINGS FL 33166

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

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

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME GREGORY, RONALD A.  
STREET ADDRESS 465 S. ROYAL POINCIANA  
CITY-ST-ZIP MIAMI SPRINGS FL

TITLE STD ☐ DELETE

NAME GREGORY, URSULA M.  
STREET ADDRESS 465 S. ROYAL POINCIANA  
CITY-ST-ZIP MIAMI SPRINGS FL

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD ☒ Change ☐ Addition

1.2 NAME GREGORY, RONALD A.  
1.3 STREET ADDRESS 600 FALCON AVE.  
1.4 CITY-ST-ZIP MIAMI SPRINGS, FL 33166

2.1 TITLE STD ☒ Change ☐ Addition

2.2 NAME GREGORY, URSULA M.  
2.3 STREET ADDRESS 600 FALCON AVE  
2.4 CITY-ST-ZIP MIAMI SPRINGS, FL 33166

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. 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 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.

SIGNATURE: *Ursula M. Gregory* URSULA M. GREGORY 465 S. ROYAL POINCIANA BLVD. MIAMI SPRINGS FL 33166

CR2E034 (10/97)