

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 14, 2002 8:00 am
Secretary of State

044184 AV

DOCUMENT # P01000005611

1. Entity Name
ST. PETE LAUNDRY, INC.

02-14-2002 90026 024 ***150.00

Principal Place of Business
1018 MONTEREY BLVD. NE
ST. PETERSBURG FL 33704

Mailing Address
1018 MONTEREY BLVD. NE
ST. PETERSBURG FL 33704



2. Principal Place of Business
3440 4TH ST. No.

3. Mailing Address
3440 4TH ST. No.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
ST. Pete, FL

City & State
ST. Pete FL

4. FEI Number
NR 59-3690564

Applied For
☐ Not Applicable

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

Zip
33734 Country
U.S.A.

Zip
33734 Country
U.S.A.

6. Name and Address of Current Registered Agent
COHRS, DENIS A
2841 EXECUTIVE DR., #120
CLEARWATER FL 33762

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 _____ DATE _____
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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 \$150.00
After May 1, 2002 Fee will be \$550.00
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	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	HARRIS, LAURIE		NAME		
STREET ADDRESS	1018 MONTEREY BLVD. NE		STREET ADDRESS		
CITY-ST-ZIP	ST. PETERSBURG FL 33704		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	NUSSBAUM, VALARIE		NAME		
STREET ADDRESS	1018 MONTEREY BLVD. NE		STREET ADDRESS		
CITY-ST-ZIP	ST. PETERSBURG FL 33704		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	HARRIS, PAGE		NAME		
STREET ADDRESS	1248 79TH ST. SOUTH		STREET ADDRESS		
CITY-ST-ZIP	ST. PETERSBURG FL 33707		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: PAGE HARRIS 1/26/02 727-460-0462
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)