2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## Feb 16, 2004 08:00 AM Secretary of State **DOCUMENT # P01000005611** 1. Entity Name ST. PETE LAUNDRY, INC. Principal Place of Business Mailing Address 3440 4 STREET NORTH ST. PETERSBURG FL 33704 3440 4 STREET NORTH ST. PETERSBURG FL 33704 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt #, etc MOORE CR2E034 (11/03) City & State Applied For City & State 4. FEI Number 59-3690564 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name COHRS, DENIS A Street Address (P.O. Box Number is Not Acceptable) 2841 EXECUTIVE DR., #120 **CLEARWATER FL 33762** City Zio 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. 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) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TILE Delete HILE ☐ Change Addition HARRIS, LAURIE HAME MANE 11000000052746 STREET ADDRESS 1018 MONTEREY BLVD, NE STREET ADDRESS 02/16/04-80103-021 150.00 CITY - ST - ZIP ST, PETERSBURG FL 33704 CATY-SI-ZIP Delete TRUE ☐ Change Addition THLE NUSSBAUM, VALARIE NAME NAME 1018 MONTEREY BLVD. NE STREET ADDRESS STREET ADDRESS ST. PETERSBURG FL 33704 CITY-ST-78P CITY-ST-ZIP Delete RITLE □ Change Addition TITLE NAME NAME HARRIS, PAGE STREET ADDRESS STREET ADDRESS 1248 79TH ST. SOUTH CETY-ST-ZIP CITY-ST-ZIP ST. PETERSBURG FL 33707 TITLE Change Addition IME ☐ Delete NAME MANAF STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHY-ST-ZIP ☐ Change MILE ☐ Detete 3:31 F Addition Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete THE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-78P (20Y+ST-789) 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 supplier ental 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 outrustee 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.

**FILED** 

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