## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT # P01000061805**

1. Entity Name

KIM'S COIN LAUNDRY, INC.



FILED Apr 28, 2006 08:00 AN Secretary of State

Principal Place of Business

810 N POWERS DR ORLANDO, FL 32819 Mailing Address

3951 MCKINNON RD WINDERMERE, FL 34786



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04202006 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3726488

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

FONG, DAVID 1221 E ROBINSON STREET ORLANDO, FL 32801

SIGNATURE:

## DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the plants of registered agent.	ourpose of changing its registere	d office or re	egistered agent, or bo	th, in the State of Florida. I am familiar with, and accept		
SIGNATURE_	Signature, typed or printed name of registered agent and title	if applicable. (NOTE, Registered	Agent signature	required when reinstating)	DATE		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00  9. Election Campaign Finan Trust Fund Contribution.			cing $\Box$	\$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS							
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WU, LISA K 3951 MCKINNON ROAD WINDERMERE, FL 34786			• • •	U00000545841 05/11/06-80094-904 150.00		
TITLE NAME STREET ADDRESS CITY-ST-ZIP					05/11/06-80094-004 150.00		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN <sup>-</sup>	THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.							

Isa K

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR