2004 FOR PROFIT CORPORATION

FILED Apr 26, 2004 08:00 AM Secretary of State

	_ ∡	73	ANNUAL REPO	RT
DOCU	IMEN	IT#	P01000099187	
1 Entity Nor	ma			

Principal Place of Business

BRICKELL LAUNDRY, INC.

1915 BRICKELL AVE

C-201 MIAMI, FL 33129 Mailing Address

2451 BRICKELL AVE APT #10A MIAMI, FL 33129



DO NOT WRITE IN THIS SPACE

04192004 No Chg-P CR2E034 (10/03)

4. FEI Number 65-1158552

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CAMELO, MARIA E 2451 BRICKELL AVENUE APT #10A MIAMI, FL 33129					DO NOT WRITE IN THIS SPACE				
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 (I applicable (NOTE, Registored Agent signature regular when refrestating). DATE									
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. Special Agent signature required when reinstating) \$5.00 May Be Added to Fees		\$5.00 May Be	U00000130742 04/26/04-80129-024_150:01				
10. HITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRECT PSTD CAMELO, MARIA E 2451 BRICKELL AVENUE #10A MIAMI, FL 33129	CTORS							
TITLE NAME STREET ADDRESS CITY-ST-ZIP									
NAME STREET ADDRESS CITY-ST-ZIP	ET ADDRESS ST-ZIP				DO NOT WRITE				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN 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 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									