2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 03, 2004 8:00 am
Secretary of State
03-03-2004 90007 026 ***150.00

DOCUMENT # P02000046004

1. Entity Name
EMERALD COAST LAUNDRY & DRY CLEANING, INC.

Principal Place of Business	Mailing Address
3900 E 11TH STREET WEST PALM BEACH FL 33401	114 SANDALWOOD LANE PANAMA CITY BCH FL 32413

MOORE CR2E034 (11/03)

2. Principal Place of Business	3. Mailing Address
3900 E. 11th St.	
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Panama City, Fl.	City & State
Zip: 32401 Country: USA	Zip Country

4. FEI Number 04-3653909 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

SAFDARI-SADALOO, JAVAD
114 SANDALWOOD LANE
PANAMA CITY BCH FL 32413

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. 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) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS		☐ Delete	11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		☐ Change ☐ Addition
TITLE	PT	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	SAFDARI-SADALOO, JAVAD		NAME		
STREET ADDRESS	114 SANDALWOOD LANE		STREET ADDRESS		
CITY-ST-ZIP	PANAMA CITY BCH FL 32413		CITY-ST-ZIP		
TITLE	VS	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	SAFDARI-SADALOO, SUSAN		NAME		
STREET ADDRESS	114 SANDALWOOD LANE		STREET ADDRESS		
CITY-ST-ZIP	PANAMA CITY BCH FL 32413		CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Susan Safdari Sadaloo SUSAN SAFDARI-SADALOO 02/29/04 (850) 233-8460
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #