2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000111184

1. Entity Name

GOLD STAR LAUNDRY #2, INC.



Principal Place of Business

Mailing Address

1014 ADAMS ST

HOLLYWOOD: FL 33019-1909

1014 ADAMS ST

HOLLYWOOD, FL 33019-1909

FILED Feb 21, 2007 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

01152007 No Chg-P

Chg-P CR2E034 (11/05)

Applied For

FEI Number
 56-2322817

Not Applicable

\$8.75 Additional

5. Certificate of Status Desired

Tee Required

6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable

MAROUN, SABA 1014 ADAMS ST HOLLYWOOD, FL 33019-1909

DO NOT WRITE IN THIS SPACE

| | 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 the obligations of registered agent. | am familiar with, and accept |
|-----|---|------------------------------|
| eir | TIÊNAT, IDE | |

(NOTE, Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00

Election Campaign Financing
 Trust Fund Contribution.

\$5.00 May Be

- U00000642057 03/01/07-80027-008 150.00

| After May 1, 2007 Fee Will be \$550.00 | | | |
|--|--|-------|--|
| 10. | OFFICERS AND DIREC | CTORS | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DP MAROUN, SABA 1014 ADAMS ST HOLLYWOOD, FL 330191909 | | |
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| TITLE NAME STREET ADDRESS CITY+ST-ZIP | | | |
| NAME STREET ADDRESS CITY-ST-ZIP | | | |

DO NOT WRITE IN THIS SPACE

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.

SIGNATURE

MANUFAND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12/16/07

1954-253-7045

Daytime Phone #