

2005 FOR PROFIT CORPORATION ANNUAL REPORT

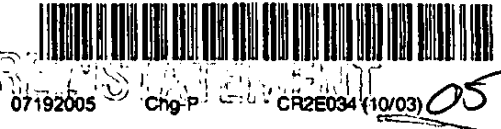
9/9/2005-90034-035-\$150.00-\$150.00

DOCUMENT # P04000040296 1. Entity Name LE PAVILLON LAUNDROMAT, INC.	
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FILED
05 OCT 14 PM 1:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business 14807 N.E. 6TH AVENUE NORTH MIAMI, FL 33162	Mailing Address 14807 N.E. 6TH AVENUE NORTH MIAMI, FL 33162
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2. Principal Place of Business 15160 N.E. 6 AVE Suite, Apt. #, etc.	3. Mailing Address 486 N.E. 167 ST. Suite, Apt. #, etc.
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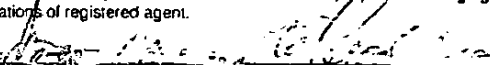


City & State No. MIAMI BEACH FL Zip 33162 Country U.S.A.	City & State No. MIAMI BEACH FL Zip 33162 Country U.S.A.
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4. FEI Number 76-0786167	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent MARCELLUS, KITT C 14807 N.E. 6TH AVENUE NORTH MIAMI, FL 33162	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 486 N.E. 167 ST. City No. MIAMI BEACH, FL Zip Code 33162
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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.

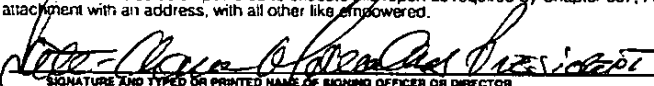
SIGNATURE:  DATE: _____

(Signature, typed or printed name of registered agent and date if applicable) (NOTE: Registered Agent signature required when reappointing)

FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
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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; changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  7/19/05 (305) 244-346

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR