

2007 FOR PROFIT CORPORATION REINSTATEMENT

FILED

08 JAN -7 PM 2:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



11202007 REIN-P CR2E098 (1/07)

DOCUMENT # P04000040296		
1. Entity Name LE PAVILLON LAUNDROMAT, INC.		

Principal Place of Business 15160 N.E. 6 AVE NO. MIAMI BEACH, FL 33162	Mailing Address 486 NE 167 ST NO MIAMI BEACH, FL 33162
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2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

6. Name and Address of Current Registered Agent	
MARCELLUS, KITT C 486 NE 167 ST NO MIAMI BEACH, FL 33162	

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: <i>Eric Sam Apudallas</i>	DATE: 1/2/07
(NOTE: Registered Agent signature required when reinstating)	

FILE NOW!!! FEE IS \$150.00 After January 1, 2008, Fee will be \$300.00	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	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PDS MARCELLUS, KITT C 170 NE 158 STREET BISCAYNE GARDENS, FL 33165	TITLE NAME STREET ADDRESS CITY-ST-ZIP	100113368631 12/24/07--01018--001 **\$150.00
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REINSTATEMENT 07^{KS}

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: <i>Eric Sam Apudallas</i>	DATE: 1/2/08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	