## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000080558

ST. FLEUR, RODNEY

COCONUT CREEK, FL 33073 US

5520 NW 49 WAY

Name:

Address: City-St-Zip:

Entity Name: M & R LAUNDRIES & DRY CLEANERS, INC

FILED Apr 20, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 7471 NW 57 STREET TAMARAC, FL 33319 US **Current Mailing Address: New Mailing Address:** 5520 NW 49 WAY COCONUT CREEK, FL 33073 US FEI Number: 72-1618118 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ST. FLEUR, MARGUERITE 5520 NW 49 WAY COCONUT CREEK, FL 33073 US 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. SIGNATURE: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition ST. FLEUR, MARGUERITE Name: Name: 5520 NW 49 WAY Address: Address: City-St-Zip: COCOMUT CREEK, FL 33073 US City-St-Zip: Title: Title: () Change () Addition () Delete Name: ST. FLEUR. MARGUERITE Name: 5520 NW 49 WAY Address: Address: COCONUT CREEK, FL 33073 US City-St-Zip: City-St-Zip: Title: Title: **TRES** () Delete () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: MARGUERITE ST. FLEUR PRES 04/20/2008