

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000117721

Entity Name: CAMILA COIN LAUNDRY, INC.

FILED
Jan 09, 2008
Secretary of State

Current Principal Place of Business:

1617 NE 8 STREET
HOMESTEAD, FL 33030

New Principal Place of Business:

1617 NE 8 STREET
HOMESTEAD, FL 33033

Current Mailing Address:

1617 NE 8 STREET
HOMESTEAD, FL 33030

New Mailing Address:

1617 NE 8 STREET
HOMESTEAD, FL 33033

FEI Number: 20-5552000

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANCHEZ, ANGEL
1617 NE 8 STREET
HOMESTEAD, FL 33030 US

Name and Address of New Registered Agent:

SANCHEZ, ANGEL
1617 NE 8 STREET
HOMESTEAD, FL 33033 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: ANGEL SANCHEZ

01/09/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SANCHEZ, ANGEL
Address: 1617 NE 8 STREET
City-St-Zip: HOMESTEAD, FL 33030

Title: VP () Delete
Name: SANCHEZ, BERNARDO
Address: 1617 NE 8 STREET
City-St-Zip: HOMESTEAD, FL 33030

Title: S () Delete
Name: SANCHEZ, ANGEL
Address: 1617 NE 8 STREET
City-St-Zip: HOMESTEAD, FL 33030

Title: T () Delete
Name: SANCHEZ, BERNARDO
Address: 1617 NE 8 STREET
City-St-Zip: HOMESTEAD, FL 33030

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: ANGEL SANCHEZ

P

01/09/2008

Electronic Signature of Signing Officer or Director

Date