

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000061623

**FILED**  
**Apr 25, 2012**  
**Secretary of State**

**Entity Name:** SPOTLESS LINEN SERVICE, INC.

**Current Principal Place of Business:**

900 TRUMAN AVENUE  
KEY WEST, FL 33040

**New Principal Place of Business:**

900 TRUMAN AVENUE  
KEY WEST, FL 33040 UN

**Current Mailing Address:**

900 TRUMAN AVENUE  
KEY WEST, FL 33040

**New Mailing Address:**

**FEI Number:** 26-2894218

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ALTORO, OYBEK A  
900 TRUMAN AVENUE  
KEY WEST, FL 33040 US

**Name and Address of New Registered Agent:**

EGAMBERDIEV, OYBEK A  
900 TRUMAN AVENUE  
KEY WEST, FL 33040 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:** OYBEK EGAMBERDIEV

04/25/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** PTS  
**Name:** EGAMBERDIEV, OYBEK A  
**Address:** 900 TRUMAN AVENUE  
**City-St-Zip:** KEY WEST, FL 33040

I hereby 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 all other like empowered.

**SIGNATURE:** OYBEK EGAMBERDIEV

PRES

04/25/2012

Electronic Signature of Signing Officer or Director

Date