

FILE NOW: FILING FEE AFTER MAY 1ST IS \$0.00

FILED
Mar 18 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT STATE Sandra B. Morth Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P93000060064 (1)
 1. Corporation Name
TAM O'SHANTER COIN LAUNDRY, INC.



Principal Place of Business 1249 S ST RD #7 N LAUDERDALE FL 33068 US	Mailing Address 1249 S. STATE ROAD 7 N. LAUDERDALE FL 33068 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 08/23/1993	
21 Suite, Apt. #, etc.	22 City & State	26 Suite, Apt. #, etc.	27 City & State	4. FEI Number 65-0434623	Applied For <input type="checkbox"/> Not Applicable
23 Zip	24 Country	28 Zip	29 City	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
25		30		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
g. Name and Address of Current Registered Agent				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

g. Name and Address of Current Registered Agent ALLISON, DARLENE 1249 S. STATE ROAD 7 N. LAUDERDALE FL 33068		10. Name and Address of New Registered Agent	
81 Name	82 Street Address (P.O. Box Number is Not Acceptable)		
83			
84 City	85 Zip Code	FL	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the over-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: *Darlene Allison* DATE: **3/12/98**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PS	NAME ALLISON, DARLENE	11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 1249 S. STATE ROAD 7		12 NAME	
CITY - ST - ZIP N. LAUDERDALE FL	<input type="checkbox"/> DELETE	13 STREET ADDRESS	
TITLE		14 CITY - ST - ZIP	
NAME		21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		22 NAME	
CITY - ST - ZIP		23 STREET ADDRESS	
TITLE		24 CITY - ST - ZIP	
NAME		31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		32 NAME	
CITY - ST - ZIP		33 STREET ADDRESS	
TITLE		34 CITY - ST - ZIP	
NAME		41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		42 NAME	
CITY - ST - ZIP		43 STREET ADDRESS	
TITLE		44 CITY - ST - ZIP	
NAME		51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		52 NAME	
CITY - ST - ZIP		53 STREET ADDRESS	
TITLE		54 CITY - ST - ZIP	
NAME		61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		62 NAME	
CITY - ST - ZIP		63 STREET ADDRESS	
TITLE		64 CITY - ST - ZIP	
NAME		71 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		72 NAME	
CITY - ST - ZIP		73 STREET ADDRESS	
TITLE		74 CITY - ST - ZIP	
NAME		81 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		82 NAME	
CITY - ST - ZIP		83 STREET ADDRESS	
TITLE		84 CITY - ST - ZIP	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Darlene Allison Pres.* DATE: **3/12/98** (954) 971-0110

CR2E034 (10/97)