## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

**19**98



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 10 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000077847 (0)

**GULF BEACHES LAUNDRY SERVICES, INC.** 

Principal Place of Business Mailing Address					4 SOOLODEL SED THESE STEEL GOTES ONES ONES DOING TO SILL HOOD (SES) OF DISTRIBUTE STOLE	
18111 GULF REDINGTON	18111 GULF BLVD. REDINGTON SHORES FL				DO NOT WRITE IN THIS SPACE.	
						3. Date Incorporated or Qualified
A Principal D	loop of Duninger	G. Malling Addrson				11/05/1993 4. FEI Number Applied For
2. Principal P	lace of Business	2a. Mailing Address 26				The state of the s
Suite, Apt.	#. etc.		Suite, Apt. #, etc.			
22		· · · · · · · · · · · · · · · · · · ·	27			5. Certificate of Status Desired Fee Required
City & State		City & State				6. Election Campaign Financing \$5.00 May Be
23		28				Trust Fund Contribution
Zip	Country	Zip	Coun	try		8. This corporation owes or has paid the current year Intaparble
24	25		30			Personal Property Tax due June 30. Yes Vo
	g. Name and Address of Cu	Irrent Hegistered Agent		31	Name	10. Name and Address of New Registered Agent
	KARACANE, PHILIP		Ľ		INATIO	
18111 GULF BLVD.				32	Street Addre	dress (P.O. Box Number is Not Acceptable)
RE	DINGTON SHORES FL 3370	5	8	33		
				_		
			6	34	City	FL 85 Zip Code
						rporation 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	Trigonical Titol, and accept the	, solige (10.10 s.), december 257, 259 s.	noo blata		•	
	Signature, typed or pointed name of registers	ed agent and title if applicable. (NOTE	. Registered	Ager	nt signature require	ured when reinstating) DATE
12.		AND DIRECTORS	13.		·	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	OP	☐ DELETE	1.1 Titl			] Change    Additio
NAME	CHIARAEANE, PHILIP		1.2 NAM			
STREET ADDRESS	14233 85TH AVE. N				ADDRESS	
CITY-ST-ZIP TITLE	SEMINOLE FL 33646	DELETE	1.4 City 2.1 Titu		- ZIP	Change Additio
NAME			2.2 NAV			
STREET ADDRESS			4		ADDRESS	
CITY-ST-ZIP			2.4 CIT			
TITLE		DELETE	3.1 TITLE			Change Additio
NAME			3.2 NAM	\$E		
STREET ADDRESS			3.3 STRE	EET A	ADDRESS	
CITY-ST-ZIP			3.4. CITY	Y-SI	( - ZIP	
TITLE		☐ DELETE	4.1 TITLI	E		☐ Change ☐ Additio
NAME			4. 2 NAN			
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP		DELETE	4.4 City 5.1 Titu		ZIP	Change Additio
TITLE NAME			5.1 IIILI 5.2 NAM			
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP			5.4 CITY			
TITLE		☐ DELETE	6.1 TITLE		£11	☐ Change ☐ Additio
NAME			6.2 NAM	E		<u> </u>
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP			6.4 CITY			
14 Lhereby c	ertify that the information supplies	ed with this filing does not qualify fo	r the exem	nnti	ion stated in S	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 trusted 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.						