## 2001 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P93000082775 THOMAS COIN LAUNDRY, INC. Principal Place of Business Mailing Address 1574 NW 6TH ST 1421 NW 33RD AVE FT LAUDERDALE FL 33311 FT. LAUDERDALE FL 33311 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State

Zip

6. Name and Address of Current Registered Agent

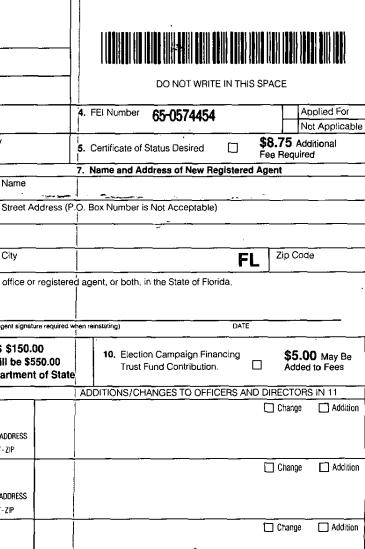
Zip

THOMAS, BEN

1421 NW 33RD AVE FT. LAUDERDALE FL 33311

## **FILED** Apr 24, 2001 8:00 am Secretary of State

04-24-2001 90039 046 \*\*\*150.00



	·			<u> </u>	
			City	FL	Zip Code
8. 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	Signature, typed or printed name of registered agent and ti	the if applicable (NOTE: Pool	gistered Agent signature required w	hen reinstating) DATE	
	alginature, typed or printed traine of registered agent and tr	tie ii applicable. (140 t¢: hei	gistered Agent signature required w	MATE DATE	
Tax filing requirement and elects to do so. After MAY 1, 2001		EE IS \$150.00 Fee will be \$550.00 o Department of State	10. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees	
11. OFFICERS AND DIRECTORS		12.	ADDITIONS/CHANGES TO OFFICERS AND D	IRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D THOMAS, BEN 1574 NW 6TH ST FT LAUDERDALE FL 33311	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY- ST-ZIP		Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	to a security and the	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	- وپارلست حالت	Change Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	·	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Change Addition
13. I hereby c	ertify that the information supplied with this	filing does not qualify for the	exemption stated in Secti	ion 119.07(3)(i), Florida Statutes. I further certify	that the information

Country

Name

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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.