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

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000083296 (2)

CORAL SPRINGS PLAZA COIN LAUNDRY, INC.

Principal Place of Business

ALC: 07 950

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7

Mailing Address

## **FILED** Jan 23 1998 8:00am Secretary of State



BO11 W SAMI CORAL SPRIN		8011 W SAMPLE RD CORAL SPRINGS FL 33	nes		
OOME OF AIR	100 12 3000	CONNE OFFINOS PE 33	003	DO NOT WRITE IN THI	S SPACE
	*			3. Date Incorporated or Qualified	
2. Principal Pla	on of Business	2a. Mailing Address		12/07/1993	
2. Finicipal Fia	W Sample Rd	26 Mailing Address		4. FEI Number	Applied For Not Applicable
Suite, Apt. #		Suite, Apt #, etc.		65-0460924	\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State	. COOLIA C	City & State		6. Election Campaign Financing	\$5.00 May Be
	C-SPRINGS, FL	28		Trust Fund Contribution	Added to Fees
Zig 3306	S Country Broward	Zip	Country	This corporation owes or has paid the corporation of the corporation owes or has paid the corporation of the corporation owes or has paid the corporation of the corpora	current year Intangible
24 3500	9. Name and Address of Current	29	30	Personal Property Tax due June 30.  10. Name and Address of New Registere	
R1 Name					
	II W SAMPLE RD			MELAMED MEIR	
• • •	RAL SPRINGS FL 33065		Street At	ddress (P.O. Box Number is Not Acceptable)	
			83		
			B4 City		OF 7in Code of
			land Cuty Co	orul-springs F	L 85 29 Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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					
Ś	gnature, typed or printed name of registered ages		Registered Agent signature re	<u> </u>	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	PD MEI AMED MEID	☐ DELETE	1.1 TITLE		Change Addition
NAME	MELAMED, MEIR 8011 W SAMPLE RD		1.2 NAME		
STREET ADDRESS	CORAL SPRINGS FL 33065		1.3 STREET ADDRESS		
CITY-SI-ZIP TITLE	CONAL SPRINGS TE 33005	DELETE	1.4 C(TY - ST - ZIP 2.1 TITLE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-\$T-ZIP			2. 4 CITY-ST-ZIP		
TITLE		DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		ļ
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CiTY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 T(TLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		DOLLET	5.4 C(TY - ST - Z(P		Change Addition
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
14. I hereby cer	tify that the information supplied wil	h this filing does not qualify for	64 CITY-ST-7IP	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:

1-15-98 (954)3410368