FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

P94000018544 (4) **DOCUMENT #** 1. Corporation Name

EXECUTIVE LAUNDHY AND LINEN, INC.					
Principal Place of Business		Mailing Address 4821 NORTHEAST 10TH AVENUE OAKLAND PARK FL 33334			
4821 NORTHEAST 10TH AVENUE OAKLAND PARK FL 33334					
				 Date Incorporated or Qualified 03/07/1994 	3a. Date of Last Report 04/07/1995
	ace of Business	2a. Mailrig Address		4. FEI Number 65-0474563	Applied For
Suite, Ant.	# pto	Suite Apt. #, etc.		03/04/4303	Not Applicable
22	#, C .C.	27]		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	9	Oity & State		Election Campaign Financing Trust Fund Contribution	S5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for i	
24	25	29	30	Florida Statutes Yes	
	9. Name and Address of Curre	ent Registered Agent	61 Nanie	10. Name and Address of New R	egistered Agent
DOLIG!	ASS, GEORGETTE S				
	UTHEAST NINTH STREET		82 Street Ad	dress (P.O. Box Number is Not Acceptab	.ej
FORT L	AUDERDALE FL 33316-1128		83		
			84 City		FL 85 Zip Code
familiar wi	red agent, or both, in the state of hic th, and accept the obligations of, Se Signature by eater prode them of response Lay	ction 607.0505, Florida Statute		eat are relating.	DATE
12.	OFFICERS A	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFF	
TITLE	PVST	□ DELETE	1 1 TITLE		Change Addition
NAME	FITZPATRICK, R B JR.	Child in	1 2 NAME		
STREET ADDRESS	4821 NORTHEAST 10TH AV	/ENUE	1.3 STPEHT ADDRESS		
CITY - ST - ZIP	OAKLAND PARK FL 33334	F7 551576	1.4 CiTY - S1 - 7iP		Change
TITLE	FITZPATRICK, R B JR.	☐ DELETE	2.1711.6		Change Addition
NAME STREET ADDRESS	4821 NORTHEAST 10TH A	/ENLIF	2.2 NAME 2.3 STREET ADDRESS		
CITY-ST-ZIP	OAKLAND PARK FL 33334		2 4 City - St - ZiP		
TITLE		DELETE	3 1 TIFLE		Change Addition
NAME		_	3 2 NAME		
\$TREET ADDRESS			3.3 STREET ACCORESS		
CITY - ST - ZIP			3.4 CITY - ST - ZIP		
TITLE		☐ DELETE	4 † TilleE		Charige Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY - ST - ZIF		The second secon	4 4 CITY - SF - ZIP		
TITLE		☐ DELETE	5 1 TITLE		Change Addition
NAME	1		5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CHTY-ST-ZIF		<u> </u>	5 4 CITY - ST - ZIF		F1 A
TUTLE		☐ DELETE	6 1 TITLE		Change Addition
NAME			6 2 NAME		
STREET ADDRESS	1		6.3 STREET ADDRESS		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: 94

SIGNATURE AND TYPE OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/20/26

(954) 938-30>8