

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 24, 2002 8:00 am
Secretary of State

04-24-2002 90294 004 ***150.00

DOCUMENT # P94000056933

1. Entity Name
SHORECREST LAUNDRY & CLEANERS, INC.

Principal Place of Business
1303 SOUTHWEST 16 STREET
MIAMI FL 33145

Mailing Address
1303 SOUTHWEST 16 STREET
MIAMI FL 33145



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
646 NE 79 ST.
 Suite, Apt. #, etc.
MIAMI, FL
 City & State

3. Mailing Address
 Suite, Apt. #, etc.
 City & State

Zip **33138** Country **USA**

Zip Country

4. FEI Number **65-0509376**

Applied For
 Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

JIMENEZ, FILOMENO J.
1303 S.W. 16TH STREET
MIAMI FL 33145

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete
 NAME **JIMENEZ, FILOMENO J**
 STREET ADDRESS **1303 SOUTHWEST 16 STREET**
 CITY-ST-ZIP **MIAMI FL 33145**

TITLE **VP** ☒ Delete
 NAME **JIMENEZ, HORTENIA J**
 STREET ADDRESS **1303 SW 16TH ST.**
 CITY-ST-ZIP **MIAMI FL 33145**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
 NAME **JIMENEZ, HORTENIA J.**
 STREET ADDRESS **1303 S.W. 16 ST**
 CITY-ST-ZIP **MIAMI, FL 33145**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

SIGNATURE: **FILOMENO J. JIMENEZ** 04/12/02 (305) 751-5828
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CP2E034 (9/01)