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PROFIT CORPORATION **ANNUAL REPORT**

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Morthani

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # **P9400092708 (4)**1. Corporation Name

COMMERCIAL LAUNDRIES OF SOUTH FLORIDA, INC.

	\$8.75 Addi Fee Requii \$5.00 Ma Added to F e tax under s 199.0	ed For pplicable itional red y Be ees
28. Mailing Address 26. Suite, Apt. #, etc. 27. City & State 28. Country 29. Country 29. Ountry 30. Name and Address of Current Registered Agent MOORE, W. RODGERS 12/2 1/1994 4. FEI Number 59-1226374 5. Certificate of Status Desired 6. Election Campaign Financing Trust Fund Contribution 10. Name and Address of New Registered 81. Name MOORE, W. RODGERS	02/16/1995 Applie Not Ay \$8.75 Addi Fee Requii \$5.00 Ma Added to F e tax under s 199.0 ed Agent	ed For pplicable itional red y Be ees
21	\$8.75 Addi Fee Requi \$5.00 Ma Added to F e tax under s 199.0	pplicable itional red y Be ees
Strict, Apt. #, etc. 22 27 City & State City & State Country Zip No Registered Agent Name MOORE, W. RODGERS Street Address /P.O. Box Number is Not Acceptable)	\$8.75 Addi Fee Requii \$5.00 Ma Added to F e tax under s 199.0	itional red y Be ees
City & State City &	Fee Requir \$5.00 Ma Added to F e tax under s 199.0 ed Agent	red y Be ees
City & State City & State 28 29 Country Zip Country Zip Country Zip Country Zip Country Zip Country Zip Country 30 Florida Statutes Florida Statutes Yes No 9. Name and Address of Current Registered Agent MOORE, W. RODGERS 6. Election Campaign Financing Trust Fund Contribution Country 8. This corporation has liability for intangible Florida Statutes Yes No No Rought Address (P.O. Box Number is Not Acceptable)	\$5.00 Ma Added to F e tax under s 199.0 ed Agent	y Be ees
Trust Fund Contribution Zip Country Zip Country 24 25 29 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent MOORE, W. RODGERS Street Address /P.O. Box Number is Not Acceptable)	Added to F e tax under s 199.0 ed Agent	ees
24 25 29 30 Florida Statutes Yes No. 9. Name and Address of Current Registered Agent MOORE, W. RODGERS 81 Name 82 Street Address IP.O. Box Number is Not Acceptable)	ed Agent	032,
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered 81 Name MOORE, W. RODGERS 82 Street Address IP O. Box Number is Not Acceptable)	ed Agent	
MOORE, W. RODGERS 81 Name 82 Street Address /P.O. Box Number is Not Acceptable)		
MOORE, W. RODGERS 82 Street Address IP O. Box Number is Not Acceptable)		
SUITE 210-A		
BOCA RATON FL 33431		
F I I	L 85 Zip Cod	
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 corregistered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment a familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature types or proted them of registed agent and the it agent after. (NOTE Registered Agent signature reported when reinstating) DAT:	as registered agent	red office t. I am
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AN		12
THE D DELETE 1 1 TITLE	·	Addition
NAM: KLIGMANN, EUGENE W 1.2 NAME		
STREET ADDRESS 2745 STIRRUP LN 1.3 STREET ADDRESS		
CITY-\$1-7/6		
NAME STEWART, JOHN H JR. 22 NAME	Change 🔲	Addition
STREAT ADDRESS 15401 SW 74 CIR CT #304 2.3 STREET ADDRESS		
OUT ST-20F MIAMI FL 33193 24 CITY-ST-20F		
TIFLE DELETE 31TIFLE	Change	Addition
NAME STEWART, PAUL C 32 NAME		
STHEFT APORESS 14856 SW 132 AVE 33 STREET ADDRESS		,
ONY ST 709 MIAMI FL 33186 34 CITY-ST-709 1014F 4 1 TUE		
The state of the s	Change	Addition
STREET ADDRESS 4.3 STREET ADDRESS		
CITY-ST ZP 44 CITY-ST-ZIP		i
DELETE 5 1 TILE	Change	Addition
NAME 52 NAME	U +	
STREET ADDRESS 53 STREET ADDRESS		
C 1Y ST ZP 54 C(1Y-ST-ZP)		
TILE DELETE 6.1 TITLE	Change	Addition
AAVE 62 NAME		
SHRELADDRESS 63 STREEL ADDRESS		
14. 1do hereby certify that the information supplied with this filling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). F	Filed And I. 11	

Cert fy 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.

GNATURE:

SIGNATURE

Daytine Proce

SIGNATURE: