2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 15, 2005 8:00 am Secretary of State

DOCUMENT # P95000076688 1. Entity Name LAUNDRYMANIA, INC.								04-15-20	•	032 ***15	0.00
Principal Place 10760 W FLA SWEETWATER	AGLER ST ST	E ONE	Mailing Address 10760 W FLAGLER ST STE ONE SWEETWATER, FL 33174					. 18181 81411 88114 8831	i 88)(98(9) UE 8	01110 91121 (EKOA 101	
2. Principal Place of Business			3. Mailing Address								
Suite, Apt. #, etc.			Suite, Apt. #, etc.				04132005	Chg-P	CR2E	034 (10/03)	
City & State			City & State				4. FEI Numb 65-062				plied For t Applicable
Zip			Zip Cour		try	Fee Requi			\$8.75 Add Fee Required		
6. Name and Address of Current Registered Agent					Name		7. Name and	Address of Ne	w Registered	I Agent	
RODRIGU 10760 W F SWEETW	LAGLER	ST STE ONE		Street Address (P.O. Box Number is Not Acceptable)							
				City	City FL Zip Code					2	
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. I am familiar with, and accept the obligations of registered agent.											
SIGNATURE_	Signature, Noed	or printed name of registered agent ar	equired	when reinstating)		DATE					
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE											
		FEE IS \$150.00 5 Fee will be \$550.0	9. Election Campa Trust Fund Cont				.00 May Be ed to Fees				
10.		OFFICERS AND D	DIRECTORS	11.			ADDITIONS	/CHANGES TO	OFFICERS AN	D DIRECTORS	S IN 11
TITLE	D	157 BANII	☐ Delete	E					☐ Change	☐ Addition	
NAME RODRIGUEZ, RAUL STREET ADDRESS 10760 W FLAGLER ST STE ONE				ie Eet address							
CITY-ST-ZIP SWEETWATER, FL 33174					'-ST-ZIP						
TITLE	D		Delete	TITL	E					☐ Change	Addition
NAME STREET ADDRESS		JES, BERTHA FLAGLER ST STE ONE	,	NAM STRI	eet address						
CITY-ST-ZIP					-ST-ZIP						
TITLE		***	☐ Delete	TITL	E					☐ Change	☐ Addition
NAME CYRCET ADDRESS				NAM	IE EET ADDRESS						
STREET ADDRESS CITY-ST-ZIP				1	-ST-ZIP						
TITLE			☐ Delete	TITL	E					☐ Change	☐ Addition
NAME STREET ADDRESS				NAM	1						
CITY-ST-ZIP					EET ADDRESS (-ST-ZIP						
TITLE			☐ Delete	TITL	E					Change	Addition
NAME				NAM	_						
STREET ADDRESS CITY-ST-ZIP			S as a Light and		eet address 7-st-zip		****				
TITLE	i.		☐ Delete	ΤITL	£ .					Change	Addition
NAME				NAA	1						
STREET ADDRESS CITY-ST-ZIP				1	EET ADDRESS 7-ST-ZIP						
12. 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 employed to execute this report as required by Chapter 602. Florida Statutes: and that my appearances in Block 10 or Block 11 if											
indicated on this report of supplemental report is true and accurrate and that my signature shall have the same legal effect as it made under barn, that ram an officer of 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. SIGNATURE: SIGNATURE: SIGNATURE:											
SIGNAT	'URE: \	x/ naux	- regues				4112	005	2 V V ^ Z	* 7 * 4 Y	1/3