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 # P95000087316 (2) 1. Corporation Name

WASH WORLD COIN LAUNDRY, INC.	
Principal Place of Business	Mailing Address
5750 NW 27TH AVE MIAMI FL 33142	C/O RIESENBERG 644 E. HALLANDALE BCH BLVD. HALLANDALE FL 33009
2. Principal Place of Business	2a. Mailing Address
Suite, Apt. #, etc.	Suite, Apt #, etc.
22	27

FILED May 27 1998 8:00am Secretary of State

DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified <u>11/13/1995</u> 4. FEI Number Applied For 65-0636184 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State 8. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 28 Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes ☐ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 WARD, SANDRA 281 NE 156TH ST 82 Street Address (P.O. Box Number is Not Acceptable) **NORTH MIAMI BEACH FL 33162** 83 84 City **B**5 Zip Code 08. Florida Statutes Ithe above-named corporation submits this statement for the purpose of changing its registered athorized by the corporation's board of directors. I hereby accept the appointment as registered Pursuant to the provisions of Sections 607.0502 and 607 office or registered agent, or both in the State of Forida SIGNATURE CR2E034 (10/97 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELFTE Change Addition TITLE 1.1 TITLE WARD, SANDRA NAME 1.2 NAME 281 NE 156TH STR. STREET ADDRESS 1.3 STREET ADDRESS NO. MIAMI BEACH FL 33162 CITY-ST-ZIP 1.4 CITY - ST - ZIE DELETE Change Addition 2.1 1ITLE TITLE 2.2 NAME NAMÉ 2.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-S1-ZIP CITY-ST-ZIP DELETE Change TITLE 4.1 TITLE Addition NAME 4. 2 NAME STREET ADDRESS 4,3 STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition 5.1 TO LE TrTLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS 54 CITY-ST-ZIP CITY-ST-ZIP Change DELETE 6.1 TITLE Addition TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS

14. Thereby 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 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 of the receiver or trustee empowered to execute this report is required by Chapter 607, Florida Statutes; and that my name appears in Block 13 is a good, or in an attachment with an address.