## 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 # P95000098031 (4)

H & P COMMERCIAL LAUNDRY, INC.

**FILED** Apr 27 1998 8:00am Secretary of State



						-{			
Principal Place of Business Mailing Address							stiff, still fålån stimt sti	, , , ,	
17184 FRONT BEACH RD 153 SEACLUSION CIR									
	BEACH FL 32413		PANAMA CITY BEACH FL 32413			DO NOT WRITE IN THIS SPACE			
US		US	US			3. Date Incorporated or Qualified			
						·		İ	
	-10	do Mailing Address				12/29/1995 4. FEI Number	Applie	d Eor	
— ·	ace of Business	2a. Mailing Address						oplicable	
21	H	[26]	Suite, Apt. #, etc.			59-3346817	\$8.75 Addi		
Suite, Apt	₩, etc.		<del> </del>			5. Certificate of Status Desired	Fee Requi		
City & State		City & State	City & State			A Fluidin Committee Financia	\$5.00 Ma		
<b>—</b> '	3	<u></u>	<del>                                      </del>			6. Election Campaign Financing Trust Fund Contribution	Added to F		
<b>23</b> ] Zip	Country		Zip Country			8. This corporation owes or has paid the			
24	25	29	30	,		Personal Property Tax due June 30.	Yes N		
24	g. Name and Address of Curi		301			10. Name and Address of New Register			
4481	RRIS. MARY HELEN			81	Name				
	SEACLUSION CIR		ļ	_		(5.0. 5)			
	VAMA CITY BEACH FL 32413			82	Street Addre	Address (P.O. Box Number is Not Acceptable)			
				83					
			ľ	84	City	F	85 Zip Cod	le	
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 changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.									
SIGNATURE Signature, typed or proted name of registered agent and life if applicable (NOTE Registered Agent signature required when reinstating)  DATE									
12.		AND DIRECTORS	13.	i Alge	art signature redute	ADDITIONS/CHANGES TO OFFICERS		V 12	
TITLE				11 TITLE		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Addition	
NAME				1.2 NAME			_		
STREET ADDRESS	153 SEACLUSION CIRCLE			1.3 STREET ADDRESS			•		
CITY-ST-ZIP	PANAMA CITH BEACH FL	32413			i i				
TITLE			_	2.1 TITLE			Change	Addition	
NAME	<b></b>		22 NA	2.2 NAME					
STREET ADDRESS			2.3 STREET ADD		ADDRESS				
CITY-\$1-ZIP			2.4 CITY-ST-ZIP						
TITLE		☐ DELETE				91914	☐ Change ☐	Addition	
NAME		<del></del>	3.2 NAME						
STREET ADORESS			3.3 STREET ADDRESS		ADDRESS				
			3.4. CITY-ST-2IP						
CITY-ST-ZIP TITLE				4.1 TITLE		***	Change	Addition	
NAME				4. 2 NAME			•	-	
STREET ADDRESS					ADDRESS				
				4.4 CITY-ST-ZIP				i	
CITY-ST-ZIP TITLE		DELETE	5.1 TITLE		4."		☐ Change	Addition	
NAME		=== / <del>=</del>	5.2 NAME					İ	
STREET ADDRESS					ADDRESS				
				5.4 City-ST-ZiP					
CITY-ST-ZIP TITLE	the same of the sa		_	5.4 CITY-ST-ZIP 6.1 TITLE			Change	Addition	
NAME			6.2 NA					j	
					ADDRESS				
STREET ADDRESS			6.3 STREET ADDRESS 6.4 CITY-ST-ZIP						
CITY-ST-ZIP			6.4 CI	17-5	01 - ZIP				

14. 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 informatic 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.

850-233-0301