

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000042102

1. Entity Name

POMPAÑO LAUNDRIES, INC.

FILED

Mar 29, 2001 8:00 am
Secretary of State

03-29-2001 91014 016 ***150.00

049235

Principal Place of Business

Mailing Address

~~561 SE 18TH AVENUE~~
~~POMPAÑO BEACH FL~~

~~PO BOX 1601~~
~~POMPAÑO BEACH FL 33001~~
~~US~~

2. Principal Place of Business

370 SW 16ST.

3. Mailing Address

370 SW 16ST

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
BOCA RATON FL.

City & State
BOCA RATON FL.

4. FEI Number 65-0677146

Applied For
Not Applicable

Zip
33432

Country
USA

Zip
33432

Country
USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GANDON, FERNANDO

Name
FERNANDO GANDON

Street Address (P.O. Box Number is Not Acceptable)

~~561 SE 18TH AVENUE~~
~~POMPAÑO BEACH FL~~

370 SW 16ST.

BOCA RATON

FL 33432

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: *FERNANDO GANDON PRESIDENT*

03/19/01

Signature, typed or printed name of registered agent and title if applicable.

(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, 2001 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
GANDON, FERNANDO
~~561 SE 18TH AVENUE~~
~~POMPAÑO BEACH FL~~

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PRESIDENT
FERNANDO GANDON
370 SW 16ST
BOCA RATON FL 33432

TITLE
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☐ Delete

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CITY-ST-ZIP
☐ Change ☐ Addition

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: *FERNANDO GANDON PRES* 3/19/01 (954) 240 2899

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)