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 # P96000042378 (5)

TEMPLE TERRACE LAUNDRY, INC.

Mailing Address

FILED Apr 24 1998 8:00am Secretary of State



Principal Flace of Business		Maning Address					
8711 TEMPLE TERRACE HIGHWAY TAMPA FL 33637		2705 CLUBHOUSE DR PLANT CITY FL 33567			٠		
IMMPA FL 33	637	PEARL OF FE 33307			DO NOT WRITE IN THIS	SPACE	
					3. Date Incorporated or Qualified		
					05/17/1996		
2. Principal P	lace of Business	2a. Mailing Address	• • • • • • • • • • • • • • • • • • • •		4. FEI Number		Applied For
21		26			59-3379682	1	Not Applicable
Suite, Apt #, etc		Suite, Apt. #, etc.				Additional	
⊢ ¬		27		5. Certificate of Status Desired		Required	
City & State	9	City & State			6. Election Campaign Financing	\$5.0	O May Be
23		28			Trust Fund Contribution		
Zip	Country	7 _(p)	Countr	<i>,</i>	8. This corporation owes of has paid the cu		
<u></u>	<u></u> ⊢-1	<u></u>	30	•			∏ No
24	25 9. Name and Address of Curre	29	1301		10. Name and Address of New Registered		
		ant negletered Agent	81	Name	10. Hame and reduces of from tregions.		
	rgess, Judy		[l			
	05 CLUBHOUSE DRIVE		82 Street Ac		ddress (P.O. Box Number is Not Acceptable)		
PL/	ANT CITY FL 33567		83				
			83				
			84	City		85 Zi	p Code
				' '	FL	_	,
SIGNATURE	Signature, lypad or ported name of legistered fi				rporation submits this statement for the purpose of ation's board of directors. I hereby accept the ap		
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTO	ORS IN 12
TITLE	VP	DELETE	1.1 Juile			Change	e Addition
NAME	BURGESS, JUDY		1.2 NAME				
STREET ADDRESS	2705 CLUBHOUSE DRIVE		1 3 STREE	T ADDRESS			
	PLANT CITY FL		1.4 CITY-				
CITY-ST-ZIP TITLE	P	DELETE	2.1 TITLE	31.51	,	Change	e Addition
	•		2.2 NAME				
NAME	BURGESS, WARREN			*			
STREET ADDRESS	2705 CLUBHOUSE DRIVE			T ADDRESS			
CITY-ST-ZIP	PLANT CITY FL	DELETE	2. 4 CITY	S1-ZIP		Change	e Addition
TITLE	1. S. P.	☐ bereat	3.1 TITLE			L. Chang	e L Addition
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREE	T ADDRESS			
CITY - ST - ZIP			3.4. CITY-	ST-2IP			There -
TITLE		☐ DELETE	4.1 TITLE			Chang	e 🔲 Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREE	T ADDRESS			
CITY - ST - ZIP			4.4 CITY -	ST-ZIP	μ		
TITLE		☐ DELETE	5.1 TITLE			☐ Chang	e 🔲 Addition
NAME			5 2 NAME				
STREET ADDRESS			5.3 STREE	T ADDRESS			
CITY-ST-ZIP			5 4 CITY-				
TITLE		DELETE	61 TITLE			Chang	e Addition
NAME			62 NAME			•	
				T ADDRESS			
STREET ADDRESS			•				
CITY - ST - ZIP			6.4 CITY -	ST-ZIP			

14. Lereby 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 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.