FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT.

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000042378

1. Corporation Name

TEMPLE TERRACE LAUNDRY, INC.

Principal Place of Busine

Mailing Address

9744 TEMPLE TERRACE MICHANAY

2705 CHIRMOUSE DR

FILED Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90002 042 ***150.00



TAMPA FL 3363	PLANT CITY FL 33567			DO NOT WRITE IN THE	S SPACE			
م <u>ورو و میرن ند</u>					⇒3 ≂Date Incorporated or Qualifed			
					05/17/1996		المجينجين تحث	
2. Principal Pl	Principal Place of Business 2a. Mailing Address				4. FEI Number		plied For	
21		26			59-3379682	<u> </u>	t Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc. 27					5. Certificate of Status Desired	\$8.75 A Fee Re		
City & State City & State					6. Election Campaign Financing	\$5.00	May Be	
28					Trust Fund Contribution	Added t	io Fees	
Zip			Country		8. This corporation owes the current year Ir	ntangible		
24	25	29	30		Personal Property Tax.			
<u></u>	9. Name and Address of Currer				10. Name and Address of New Registered	i Agent		
			81	Name			_	
BURGESS, JUDY								
2705 CLUBHOUSE DRIVE			82	Street Add	dress (P.O. Box Number is Not Acceptable)			
PLANT CITY FL 33567			83					
1 6/1	11 0111 12 00007		03	`[
			84	City		85 Zip (Code	
	•				FI			
office or reagent. I as	to the provisions of Sections 607,050 egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was autitions of, Section 607.0505, Florida.	thorized by da Statutes	the corporat	poration submits this statement for the purpose of ion's board of directors. I hereby accept the appearance of the appea	ointment as re	gistered	
SIGNATURE	Signature, typed or printed name of registered age	nt and title if applicable. (NOTE: F	Registered Age	nt signature requir	red when reinstating) DATE			
12.	OFFICERS AN	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A			
TITLE	VP	☐ DELETE	1.1 TITLE			Change	☐ Addition	
NAME	BURGESS, JUDY		1.2 NAME				ļ	
STREET ADDRESS	2705 CLUBHOUSE DRIVE		1.3 STREE	T ADDRESS	r		i.	
	PLANT CITY FL		1.4 CITY-5					
CITY-ST-ZIP	P	DELETE	2.1 TITLE	31-ZIF	· · · · · · · · · · · · · · · · · · ·	☐ Change	Addition	
TITLE	•	- Deterie				_ ,	_	
NAME	BURGESS, WARREN		2.2 NAME				ì	
STREET ADDRESS	2705 CLUBHOUSE DRIVE		2.3 STREE	TADDRESS				
CITY-ST-ZIP	PLANT CITY FL		2.4 CITY-	ST-ZIP			- Addis-	
TITLE		☐ DELETE	3.1 TITLE		,	☐ Change	☐ Addition	
NAME			3.2 NAME	1			ſ	
STREET ADDRESS			3.3 STREE	TADORESS			Ì	
CITY-ST-ZIP			3.4. CITY-	ST-ZIP			_ , ~ _	
TITLE		DELETE	- 4.1 TITLE	-	. 3	☐ Change	Addition	
NAME			4. 2 NAME					
STREET ADDRESS			4.3 STREE	T ADDRESS	•			
			4.4 CITY-5		•		ļ	
CITY-ST-ZIP	·	DELETE	5.1 TITLE	J1-20-		☐ Change	☐ Addition	
		vecere	5.2 NAME					
NAME	,			TADDRESS	•	•	ļ	
STREET ADDRESS					•		İ	
CITY-ST-ZIP			5.4 CITY-1	SI-ZIP		Chanca	Addition	
TITLE		☐ DELETE	6.1 TITLE	1		Change		
NAME		•	6.2 NAME				{	
STREET ADORESS			6.3 STREE	TADDRESS			`	

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 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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE: