PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State * DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P96000056493 (5)

LAUNDRY PLUS, INC.

k also			ų	Can Can	Proc.
--------	--	--	---	------------	-------

97 AUG 21 AM 8: 5h

SECRETARY OF STATE TALLAHASSEE FLORIDA



Principal Place	e of Business	Mailing	Address				a reations the corts brist objet coils ocits and distributed the fill (60)
6917 ARLINGT	ON RD	6917 A	rlington RD				
SUITE 303 SUITE 309						DO NOT WRITE IN THIS SPACE	
BETHESDA MO	20814	BETHES	SDA MD 20814				3. Date Incorporated or Qualified 3a. Date of Last Report
O Diselect O	ann at Dunings	On Mail	ing Address			··· - ···· -	07/02/1996 4. FEI Number Applied For
	ace of Business	<u> </u>	ing Address				4. FEI Number 4.5 - 0677418 Applied For Not Applicable
Suite, Apt.	# ata	26 Cuit	e, Apt. #, etc.				\$9.7E Additional
	π, θιο.	27	c, Apr. #, 610.				5. Certificate of Status Desired Fee Regulred
22 City & State		+	& State				
_	,	28	City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
23	Country	Zip		Cou	ntrv		8. This corporation owes or has paid the current year Intangible
24	25	29		30	,		Personal Property Tax due June 30. Yes No
24	9. Name and Address of Curre		Agent	1301			10. Name and Address of New Registered Agent
AAIF	 <u> </u>	•			81	Name	
	Drew L. Mann, P.A. 1 w broward blvd						
	7				82	Street /	It Address (P.O. Box Number is Not Acceptable)
	TE 310				83		
PLA	NTATION FL 33324						
					84	City	FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.05	02 and 607.15	08, Florida Statu	ites, the at	DOVE	-named	d corporation submits this statement for the purpose of changing its registered
office or n	egistered agent, or both, in the Stat m femiliar with, and accept temoble	e of Florida. Su nations of Rec	ich change was tion 607.0505. F	authorize Iorida Stat	d by utes	the corp	d corporation submits this statement for the purpose of changing its registered importation's board of directors. I hereby accept the appointment as registered
		X . In	I AM MA	101100 0101			7/28/91
SIGNATURE	Signature, typed or printed parin of re	gent and title it appli	cable. (NC	TE: Registere	d Age	nt signature	rre required when reinstaling) D. TE.
12.	OFFICERS A	ND DIRECTOR	S	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	•		☐ DELETE	1.1 T	ILE	·	☐ Change ☐ Addition
NAME				1.2 N/	ME		Elizabeth Lieberman Pusident
STREET ADDRESS				1.3 \$1	REE1	ADDRESS	6917 Arlington Road, Suite 303
CITY-ST-ZIP				1.4 CI	IY-S	T-ZIP	Bethesda, MD 20814
TITLE			DELETE	2.1 10	TLE		Change Addition
NAME				2.2 N/	ME		8000022788584 -08/27/9701102001
STREET ADDRESS				2.3 S1	REET	ADDRESS	, -08/27/9701102001
CITY-ST-ZIP						ST-21P	****165.00 ****165.00
TITLE			DELETE	3.1 Tr			☐ Change ☐ Addition
NAME				3.2 N/			
STREET ADDRESS				1		ADDRESS	;
CITY-ST-ZIP						ST-ZIP	
TITLE			DFLETE	411			Change Addition
NAME				4. 2 N	AME		
STREET ADDRESS				4351	REET	ADDRESS	
CITY-SI-ZIP				4.4 CI			
TITLE			DELETE	5.1 11		1-211	Change Addition
NAME '			-	5.2 N/			
STREET ADDRESS						ADDRESS	
٠ ١							' .
CITY-ST-ZIP TITLE			DELETE	5.4 CF 6.1 TF		1-21	Change Addition
NAME				6.2 N			77
						ADDRESS	
STREET ADDRESS						ADDRESS	()0
CITY-ST-ZIP				6.4 CI	1Y-S	1-ZIP	

14. I do 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.

Elizabeth Lieberman المنظ

07/21/97

301-913-0416



Elizabeth Lieberman Laundry Plus 6917 Arlington Road #303 Bethesda, Maryland 20814 301-913-0416

FIORIDA DEPARTMENT OF STATE Division of Corporations Annual Report Filings P.O.Box 6327 Tallahassee, Florida 32314

July 28, 1997

re: Document #P96000056493

Annual Filing

Dear Division of Corporations:

Please be advised that we have just received for the first time the 1997 Profit Annual Report Packet, with a \$550.00 filing fee. This is our first notice of this report due., Since we are new to Florida, we were not aware of any report due. We have no prior annual report notifications.

Please accept our \$165.00 as the regular filing fee. Please let us know if this is acceptable. We would like to check that all of our mailing addresses are correct, so this does not re-occur next year.

Sincerely,

Elizabeth Lieberman