

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.  
AMOUNT DUE ON OR BEFORE 09/15/99: \$350 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT  
CORPORATION  
ANNUAL REPORT  
**1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **P96000062272** ✓

1. Corporation Name

**LAUNDRY INDUSTRY MIAMI CORP.**

Principal Place of Business

C/O PAVIA & HARCOURT  
600 MADISON AVENUE  
NEW YORK NY 10022

Mailing Address

C/O JCM ENTERPRISES LLC.  
122 SPRING STREET  
NEW YORK NY 10012

**FILED**  
**Aug 23, 1999 8:00 am**  
**Secretary of State**

08-23-1999 90008 041 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**07/25/1996**

4. FEI Number

**65-0682015**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

**\$5.00** May Be  
Added to Fees

8. This corporation owes the current year  
Intangible Personal Property. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

9. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE FL 32301**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

**FL**

85 Zip Code

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 printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PD** ☐ DELETE  
NAME **MASSAR, A.W.W.**  
STREET ADDRESS **122 SPRING STREET**  
CITY-ST-ZIP **NEW YORK NY 10012**

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
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CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **Secretary** ☐ Change ☒ Addition  
1.2 NAME **Ralph J. Galasso**  
1.3 STREET ADDRESS **600 Madison Ave., 12th Floor**  
1.4 CITY-ST-ZIP **New York, NY 10022**

2.1 TITLE **Director** ☐ Change ☒ Addition  
2.2 NAME **A.W.W. Massar**  
2.3 STREET ADDRESS **122 Spring St.**  
2.4 CITY-ST-ZIP **New York, NY 10012**

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-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 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.

(212) 980-3500

SIGNATURE:

*[Signature]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**Ralph J. Galasso**

**8/11/99**

Date

Daytime Phone #

CR2E034 (5/99)

# LAUNDRY INDUSTRY

122 Spring Street  
New York, NY 10012

PA60000062272  
608744-90008-41

August 11, 1999

Division of Corporations  
Annual Reports Filings  
PO Box 1500  
Tallahassee, FL 32302-1500

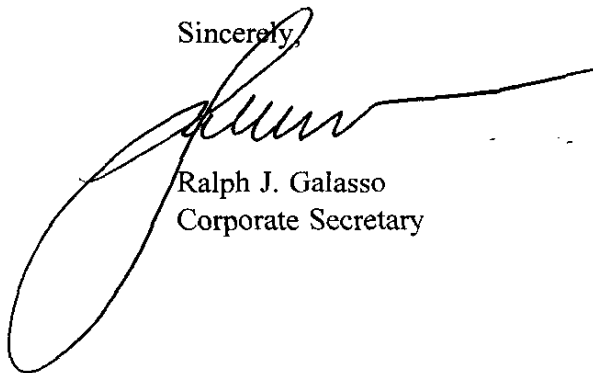
RE: Laundry Industry Miami Corp.

Dear Sir/Madam:

Enclosed please find the 2<sup>nd</sup> Notice PROFIT CORPORATION ANNUAL REPORT on behalf of the above named company and check for \$150.00. The 1<sup>st</sup> Notice was not received at our office at the above address. Therefore, please forego the additional \$400.00 penalty for not filing the 1<sup>st</sup> Notice before June 11<sup>th</sup>.

Please call if you have any questions.

Sincerely,



Ralph J. Galasso  
Corporate Secretary