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

**PROFIT** CORPORATION ANNUAL REPORT

1997



Sandra B. Mortham 🖊

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000066797 (7)

SUNBURSTE LAUNDRY CORP.

Principal Place of Business

Mailing Address

## **FILED** Mar 14 1997 8:00am Secretary of State



8089 EAST COMMERCIAL BLYD., SUITE 200 FT. LAUDERDALE FL 33308		3099 EAST COMMERCIAL BLVD SUITE 200 FT. LAUDERDALE FL 33308-4395					
					3. Date Incorporated or Qualified 08/12/1996	3a. Date of Last Report	t
	lace of Business	2a. Mailing Address			4. FEI Number	Applied	d For
21		26			65-0686895	Not Ap	plicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	- \$8.75 Addit	tional
22		27	27			Fee Require	ed
City & State	9	City & State			6. Election Campaign Financing	\$5.00 May	/ Be
23		28		Trust Fund Contribution	Added to Fe		
Zip	Country	Zip	Cou	ntry	8. This corporation has liability for i	ntangible tax under s. 199	.032,
24	25	29	30			Yes No	
9. Name and Address of Current Registered Agent 10. Name and Address of New Regist							
	OL, KERRY L			81 Name			
3099 EAST COMMERCIAL BLVD., SUITE 200			}	82 Street A	ddress (P.O. Box Number is Not Acceptab	le)	
FT. LAUDERDALE FL 33308			ĺ			···	
				83			
			}	84 City		85 Zip Code	
			1	City		FL B 210 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 trile if applicable (NOTE Registered Agent signature required when reinstating)  DATE							
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN	12
TITLE	D	DELETE	1.1 ]]]	LF		Change	Addition
NAME	ULLMAN, MICHAEL		1.2 NA	ME			
STREET ADDRESS	6252 NORTHWEST 21ST CO	Durt	1.3 \$1	REET ADDRESS			
CITY-ST-ZIP	BOCA RATON FL 33496		1400	Y-ST-ZIP			
TITLE	D	DELETE	2.1 717			Change	Addition
NAME	ULLMAN, BRUCE		2.2 NA	ME I			1
STREET ADDRESS	6252 NORTHWEST 21ST CO	RT 23 ST		REET ADDRESS			
CITY-ST-ZIP	BOCA RATON FL 33496		2.400	TY-ST-ZIP			ŀ
TITLE	D	DELETE	3.1 711			☐ Change ☐	Addition
NAME	ULLMAN, STEVEN		3.2 NA	Mŧ			ſ
STREET ADDRESS	6252 NORTHWEST 21ST CO	Durt	3.3 ST	REET ADDRESS			Ì
CITY-ST-ZIP	<b>BOCA RATON FL 33496</b>			1Y-S1-ZIP			
TITLE	D	☐ DELETE	4.1 717			☐ Change ☐	noilithA
NAME	ULLMAN, SUSAN		4. 2 NA			•	
STREET ADDRESS	6252 NORTHWEST 21ST CO	Durt	1	REET ADDRESS	•		Ì
CITY-ST-ZIP	BOCA RATON FL 33496			Y-ST-ZIP			
TITLE		DELETE	5.1 Tif			Change	Addition
NAME			5.2 NA			_ • _	
STREET ADDRESS				REET ADDRESS			ļ
CITY-ST-ZIP TITLE		☐ DELETE	6.1 TIT	Y-S1-ZIP		Change	Addition
NAME			62 NA			ـــا مهرست بـــ	
			4	i			ľ
STREET ADDRESS				REET ADDRESS			l
CITY-ST-ZIP	ov certify that the information supp	lied with this filing does not gue		Y-ST-ZIP exemption sta	ated in Section 119.07(3)(i), Florida Statutes	s. 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 am an officer or director of the corporation or the receiver or trusted empowered to execute this toport 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 a address.