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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

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May 14 1998 8:00am

Secretary of State

GARCIA LAUNDRY INC.

Principal Place	of Business	Mailing Address		o sumeripus się tustu diest antes ani	. 2011) ABIIL 18869	arimi digt #481
701 \$ DIXIE HWY POMPANO BCH FL 33069 US		2502 NW 2ND ST POMPANO BCH FL 33069 US		DO NOT WRITE	E IN THIS SPACE	
•				3. Date Incorporated or Qualified		
A Delandario	as of Ducines	12. 77.		09/06/1996		
2. Principal Pia	ace of Business	2a. Mailing Address	NW 2 st	4. FEI Number		oplied For ot Applicabl
Suite, Apt. #	5 DINE HWY	Suite, Apt. #, etc.	VW 2.31	65-0697574	\$8.75	ot Applicabl Additional
2		27		5. Certificate of Status Desired	1 1	equired
City & State		City & State		8. Election Campaign Financing	\$5.00	May Be
3 four	1900 Beach	28 Pom Jan	o Beach	Trust Fund Contribution		to Fees
Zip	Country	Zip	Country	8. This corporation owes or has p	Prom	~ ·
4 330	60 25 611	29 33069	30 Horida	Personal Property Tax due Juni		_ No
	g, Name and Address of Currer	ii Hegisterea Agent	81 Name	10. Name and Address of New R	egistered Agent	
	BUIRRE, RUFINA				.	
	02 NW 2 STREET		82 Street Add	ress (P.O. Box Number is Not Accepta	ible)	
PC	OMPANO BEACH FL 33069		83		- т.	
			84 City		FL 85 Zip	Code
11. Pursuant to	the provisions of Sections 607.050 gistered agent, or both, in the State	02 and 607,1508, Florida State of Florida Such change was	utes, the above-named corps authorized by the corporal	poration submits this statement for the tion's board of directors. I hereby access	purpose of changing is	ts registered
agent. Lam	i familiar with, and accept the oblig-	ations of, Section 60 7.0 505, F	Florida Statutes.	·	. ,,	·
SIGNATURE =	Soonbare branches a rather to the of these being from	and sould be in it manufactured to the	TE Pageloreri Sport signatura torri	ted when reinstation)	DATE	
	Signature, typed or prented name of registered age OFFICERS AN		TE Registered Agent signature requ		DATE	RS IN 12
12.	Sponture, typed or prented name of registered age OFFICERS AN		DTE Registered Agent signature required. 13. 1.1 TITLE	ted when reinstalling) ADDITIONS/CHANGES TO OFFI		
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