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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000100503 (7)

AMISTAD COIN LAUNDRY CO.

Principal Place of Business

Mailing Address

FILED May 02 1997 8:00am Secretary of State



7289-91 WEST MIAMI FL 3314	flagler stree 14	T		West Flagler S Fl 33144-2503	STREET						
								Date Incorporated or Qualifie 12/12/1996	3a. [Date of Last I	Report
	Place of Busines:		2a. Mailing Address				4. FEI Number		A	Applied For	
21	O Palm Av	26					65-0712731			lot Applicable	
Suite, Apt	#, ets	27 Su					5. Certificate of Status Desired	[IZ	\$8.75 Additional Fee Required		
City & Sta	/ & State				6. Election Campaign Financing		\$5.00 May Be				
23 Hiale	eah, Fl.	28 H					Trust Fund Contribution Added to Fees				
^{Zφ} 3301:	33012 25 USA 29 33012					Untry USA		8. This corporation has liability for inlangible tax under s. 199.032, Florida Statutes Yes W No			
	9. Name an	d Address of Curr	ent Registere	d Agent		Ι_,		10. Name and Address of New	Registered	Agent	
AME	erilawyer Ch	iartered				81	Name				
343 ALMERIA AVENUE						82 Street Address (P.O. Box Number is Not Acceptable)				,,,,,,,	
CORAL GABLES FL 33134						83					
						84	City		FL	85 Zip	Code
11 Purcuant	I to the provision	s of Sections 607.0	502 and 607 1	508 Florida Statu	tes, the s	bov	a-named corr	poration submits this statement for th			its registered
office or agent. Fa	registered agent am familiar with,	, or both, in the Sta and accept the obl	ate of Florida. I ligations of, Se	Such change was ection 607,0505, Fi	authorize lorida Sta	d by	the corporal	poration submits this statement for th tion's board of directors. I hereby ac	cept the ap	pointment a	s registered
SIGNATURE			····								
	Signature, typed or printed name of registered agent and title if applicable (NOTE) OFFICERS AND DIRECTORS					Registered Agent signature requ		ADDITIONS/CHANGES TO OF	DATE EICEDS AN	ID DIDECTO	DC IN 12
12.	PD	OFFICERS F	AND DIRECTO	DELETE	1.1]			AUDITIONS/CHANGES TO OF	FICENS AN	Change	
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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 Statules; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.