

**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 28, 2006 08:00 AM**  
**Secretary of State**

DOCUMENT # P97000030262

1. Entity Name  
CORAL WAY COIN LAUNDRY, INC.



Principal Place of Business  
1830 S.W. 3RD AVENUE  
MIAMI, FL 33129

Mailing Address  
1830 S.W. 3RD AVENUE  
MIAMI, FL 33129



04182006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
65-0741332

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

**6. Name and Address of Current Registered Agent**

SENRA, ARMANDO  
1830 S.W. 3RD AVENUE  
MIAMI, FL 33129

**DO NOT WRITE  
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE DP  
NAME SENRA, ARMANDO  
STREET ADDRESS 1830 S.W. 3RD AVENUE  
CITY-ST-ZIP MIAMI, FL 33129

TITLE VPD  
NAME SENRA, ROSA  
STREET ADDRESS 1830 S.W. 3RD AVENUE  
CITY-ST-ZIP MIAMI, FL 33129

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

100000541616  
05/10/06-80065-017 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Rosa Senra Rosa Senra 4/24/06 (305) 443-2102  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #