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

**PROFIT** CORPORATION ANNUAL REPORT

1998

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

## P97000031902 (4) DOCUMENT # N.G. LAUNDRIES, INC.

Principal Place of Business 1443 SUMMIT RUN CIRCLE

Mailing Address

## **FILED** Apr 27 1998 8:00am Secretary of State



1443 SUMMIT RUN CIRCLE WEST PALM BEACH FL 33415 WEST PALM BEACH FL 33415 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/10/1997 2. Principal Place of Business 2a, Mailing Address FEI Number Applied For 21 5900 S. DIXIE HWY 65-0744676 26 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing  $\Box$ 23 WEST PAIN BEACH FLORIDA 28 Trust Fund Contribution Added to Fees Country Country This corporation owes or has paid the current year Intangible 24 3340 25 30 Personal Property Tax due June 30. ☐ Yes 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name GARRIDO, NESTOR 1443 SUMMIT RUN CIRCLE 82 Street Address (P.O. Box Number is Not Acceptable) **WEST PALM BEACH FL 33415 B3** 84 City 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) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Addition D 1.1 TITLE Change TITLE GARRIDO, NESTOR 1.2 NAME CR2E034 NAME 1443 SUMMIT RUN CIRLCE 1.3 STREET ADDRESS STREET ADDRESS WEST PALM BEACH FL 33415 1.4 CITY - ST- ZIP CITY-ST-ZIP DELETE Change Addition 2.1 TITLE TITLE 22 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3 1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change ☐ Addition TITLE 41 TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY - ST - ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME NAME **5.3 STREET ADDRESS** STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADORESS 6.3 STREET ADDRESS CITY-ST-ZIP 64 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 13 if changod, or on an attachment with an address.

SIGNATURE:

Nastar Courids 1

NESTOR GARRIDO

ou/14/98 (561)964-4249