## 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

## P97000036507 (6) DOCUMENT #

SASSO'S COIN LAUNDRY III, INC.

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



Principal Place of Business	Mailing Address		t should not bette to be the beste based blood bille a contraction and
12790 S. DIXIE HWY.	12790 S. DIXIE HWY.		
MIAMI FL 33156	MIAMI FL 33156		DO NOT WRITE IN THIS SPACE
			3. Date Incorporated or Qualified
			04/18/1997
2. Principal Place of Business	28. Mailing Address		4. FEI Number Applied For
21 10855 S.W TAND STREET	26 10855 S.W	72Nd STREET	
Suite, Apt. #, etc.	Suite, Apt. #, etc.		S8 75 Additional
22 # 48	27 # 48		5. Certificate of Status Desired Fee Required
City & State	City & State		6. Election Campaign Financing \$5.00 May Be
23 MIANI FLORIDA	28 SKIANI Flo.	rida	Trust Fund Contribution
Zip Country	Žip To do 12:2	Country	8. This corporation owes or has paid the current year Intangible
24 <i>33/73</i> 25		30	Personal Property Tax due June 30. Yes No
9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered Agent
MANGIERO, DAVID		81 Name	
10855 SW 72 ST., #48			ress (P.O. Box Number is Not Acceptable)
MIAMI FL 33173		127	90 SOUTH DIXIE HEGHWAY
		83	
		84 City	<b>■ 85</b> Zip Code
			74MJ FL 85 Zip Code 33156
			poration submits this statement for the purpose of changing its registered tion's board of directors. I hereby accept the appointment as registered
agent. I am familiar with, and accept the obligate	ons of, Section 607.0505, Flo	rida Statutes.	tion's board of directors. Thereby accept the appointment as registered
SIGNATURE.			Ì
Signature, typicd or printed name of registered agent		Registered Agent signature requir	
12. OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE D	DELETE	1 1 TITLE	Change
NAME SASSO, MAYRA I		1.2 NAME	
STREET ADDRESS 9212 SW 151 CT.		1.3 STREET ADDRESS	
CITY-ST-ZIP MIAMI FL 33196		1.4 CITY - ST - ZIP	
TITLE	DELETE	2.1 TITLE	Change Addition
NAME SASSO, ROBERTO A		2.2 NAME	j
STREET ADDRESS 9212 SW 151 CT.		2 3 STREFT ADDRESS	
CITY-ST-ZIP MIAMI FL 33196		2. 4 CITY - ST - ZIP	· · · · · · · · · · · · · · · · · · ·
TITLE	DELETE	3.1 TITLE	Change Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	į
CITY-ST-ZIP		3.4. C(1Y - ST - ZIP	
TITLE	DELETE	4 1 TITLE	☐ Change ☐ Addition
NAME		4 2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY - ST - ZIP	
TITLE	DELETE	5.1 TITLE	Change Addition
NAME		5.2 NAME	İ
STREET ADDRESS		5.3 STREET ADDRESS	
CRY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	DELETE	6.1 TITLE	Change Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	!
CITY-ST-ZIP		6.4 CITY - ST - ZIP	
	this filing does not qualify fo		Section 119.07(3)(i), Florida Statutes. I further certify that the information

officer or director of the corporation or the receiver or trusted empowered to execute this report 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 an address.