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

**PROFIT** CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # \$03800

(7)

THE SCRUB TUB LAUNDRIES, INC.

Mailing Address

**FILED** Mar 10 1997 8:00am Secretary of State



301 ISLAND ROAD WEST PALM BEACH FL 33406		301 ISLAND ROAD West Palm Beach FL 33406-3220					
					ate Incorporated or Qualified 9/28/1990	3a. Date of L 03/29/19	
2. Principa Place of Business 2a. Mailing Address					l Number		Applied For
	Pioneer Rd	<sub>26</sub> 7070 Pion	eer ka		64-0244583		Not Applicable
Suite, Apt. 4 22		Suite, Apt. #, etc. 27		<b>5</b> . Ce	ertificate of Status Desired	1 7 -	.75 Additional see Required
	Palm Beach, FL	City & State 28 West Palm			ection Campaign Financing ust Fund Contribution		5.00 May Be dded to Fees
Zip 24 33413		Zφ 29 33413	Country 30 USA	Fic		X Yes No	
	9. Name and Address of Curren	it Registered Agent	81 Name	10. N	ame and Address of New Re	egistered Agent	
6021	:AS, JACK 1 S. DIXIE HIGHWAY ST PALM BEACH FL 33405		82 Street 7 (	070 Pic	Box Number is Not Accepta	los l	₹ <b>%</b> %¶*3
					lm Beach		
office or reagent I all SIGNATURE	to the provisions of Sections 607.050 edistered agent, or both, in the State of Armiliar with, and accept the oblig	fres Vack	es, the above-named authorized by the corporide Statutes.  UCAS  E. Registered Agent signature		3/3/97	purpose or changed the appointment	and its registered
12.	OFFICERS AN		13.		DITIONS/CHANGES TO OFFI		CTORS IN 12
TITLE	PTS	DELETE	1.1 TITLE	PTS		<b>ye</b> Ct	nange
NAME	LUCAS, JACK		1.2 NAME	Jack	Lucas		
STREET ADDRESS	301 ISLAND RD.		1.3 STREET ADDRESS		Pioneer Rd		
C(TY - ST - ZIP	WEST PALM BEACH FL		1.4 CITY-ST-ZIP	West	Palm Beach,		
THLE	V	☐ DELETE	2 1 TITLE	V	_	<b>ŞÇ</b> ) CI	hange 🔲 Addition
NAME	LUCAS, MARIANNE		2.2 NAME		lanne Lucas		
STREET ADDRESS	301 ISLAND RD		2 3 STREET ADDRESS		Pioneer Rd Palm Beach,	RT. 33411	3_2211
City-St-ZiP	WEST PALM BEACH FL		2 4 CITY-ST-ZIP	Nest	Falm Deach,		
TITLE		☐ DELETE	3 1 TITLE			∟ Cr	hange L Addition
NAME			3 2 NAME				
STREET ADDRESS			3.3 STREET ADDRESS				
CITY-SI-7IP		DELETE	3.4. CITY-ST-ZIP 4.1 TITLE	<del> </del>		[] Cr	hange Addition
NAME		F-1 PETET	4.1 TILE 4.2 NAME			<u></u> 0	- Parision
STREET ADDRESS			4.3 STREET ADDRESS		. 1		
CITY-S1-7®			4.4 CITY - ST - ZIP		:		
TITLE		DELETE	5.1 TITLE	<u> </u>		C	hange
NAME			5.2 NAME		•		
STREET ADDRESS			5.3 STREET ADDRESS				
CITY-ST-ZIF			5.4 CITY - \$1 - ZIP				
TIFLE		☐ DELETE	6.1 TITLE		TOTAL TOTAL TOTAL	□ cı	hange Addition
NAME.			6.2 NAME	[			
STREET ADDRESS			6.3 STREET AOOAESS				
CITY+S1+ZIP			6 4 CITY-ST-ZIP	<u></u>			
<del></del>							

14. I do hereby certify that the information supplied with this filing does not qualify to 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 it 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 12 or Block 13 if changed, or on an attachment with an address.