

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S98870

FILED  
Jan 03, 2006  
Secretary of State

Entity Name: GROVE CLEANERS & LAUNDRY, INC.

## Current Principal Place of Business:

1806 PONCE DE LEON BLVD  
MIAMI, FL 33134 US

## New Principal Place of Business:

1806 PONCE DE LEON BLVD  
CORAL GABLES, FL 33134 US

## Current Mailing Address:

1806 PONCE DE LEON BLVD  
MIAMI, FL 33134 US

## New Mailing Address:

1806 PONCE DE LEON BLVD  
CORAL GABLES, FL 33134 US

FEI Number: 65-0310390

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LOPEZ, MANUEL L  
85 SHORE DR W BAY HEIGHTS  
MIAMI, FL 33134 US

## Name and Address of New Registered Agent:

LOPEZ, MANUEL J  
85 SHORE DRIVE W., BAY HEIGHTS  
MIAMI, FL 33133 US

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.

SIGNATURE: MANUEL J. LOPEZ

01/03/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: LOPEZ, MANUEL J  
Address: 85 SHORE DR W  
City-St-Zip: MIAMI, FL 33132

Title: S/T ( ) Delete  
Name: LOPEZ CASTRO, ALINA M  
Address: 85 SHORE DRIVE W.  
City-St-Zip: MIAMI, FL 33133

Title: T ( ) Delete  
Name: LOPEZ, MANUEL J  
Address: 1806 PONCE DE LEON BLVD  
City-St-Zip: CORAL GABLES, FL 33134

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: LOPEZ, MANUEL J  
Address: 85 SHORE DRIVE W., BAY HEIGHTS  
City-St-Zip: MIAMI, FL 33133

Title: D (X) Change ( ) Addition  
Name: LOPEZ CASTRO, ALINA M  
Address: 85 SHORE DRIVE W., BAY HEIGHTS  
City-St-Zip: MIAMI, FL 33133

Title: S/T (X) Change ( ) Addition  
Name: LOPEZ CASTRO, ALINA M  
Address: 85 SHORE DRIVE W., BAY HEIGHTS  
City-St-Zip: MIAMI, FL 33133

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MANUEL J. LOPEZ

PD

01/03/2006

Electronic Signature of Signing Officer or Director

Date