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

PROFIT CORPORATION ANNUAL REPORT

1999

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23

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Zip

Suite, Apt. #, etc.

City & State



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCL	JMENT	# \/5	9302
		•	-

1. Corporation Name

KELLY COIN LAUNDRY AND BEVERAGE INC.

Country

officer or director of the corporation of the receiver Block 12 or Block 13 if changed, or on an attacking

SIGNATURE:

9. Name and Address of Current Registered Agent

Principal Place of Business Mailing Address

1300 N.W. 6TH STREET 1300 N.W 6TH STREET
FT. LAUDERDALE FL 33311
US

2. Principal Place of Business 2a. Mailing Address

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Zip

Suite, Apt. #, etc.

City & State

FILED May 03, 1999 8:00 am Secretary of State

05-03-1999 90121 038 ***300.00



DO NOT WRITE IN THIS SPACE

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

□No

Not Applicable

3. Date Incorporated or Qualifed

5. Certifcate of Status Desired

6. Election Campaign Financing

8. This corporation owes the current year Intangible

10. Name and Address of New Registered Agent

this report as required by Chapter 607, Florida Statutes; and that my name appears in

Daytime Phone #

Trust Fund Contribution

Personal Property Tax.

10/01/1992

65-0349022

4. FEI Number

1001 S ANDREWS AVE			82	82 Street Address (P.O. Box Number is Not Acceptable)				
STE 102			83					
	DERDALE FL 33335							
			84	City		Fl	85 Zip C	ode
office or regist	e provisions of Sections 607.0502 and 607.1508, tered agent, or both, in the State of Florida. Such miliar with, and accept the obligations of, Section	change was author	ized by	the corporation	ration submits this stateme i's board of directors. I her	ent for the purpose of eby accept the appoi	changing its ntment as rec	registered jistered
NATURE	ture, typed or printed name of registered agent and title if applicable	(NOTE: Regis	ered Ager	t signature required v	when reinstating)	DATE		
Signature, typed or printed name or registered agent and title it applicable. (NOTE: Notice let a signature). 2. OFFICERS AND DIRECTORS 13.			Sured Agent Signature (Agents Anis)					
PD			.1 TITLE				☐ Change	Addition
,	ASE, COURTNEY B.		2 NAME					
1	23 NW 52 CT			ADDRESS				
	LAUDERDALE FL		.4 CITY-S					
ST-ZIP FI			1 TITLE	- 2.17			Change	Addition
,			2 NAME					
	LSON, JUDY A.			ADDRESS				
	23 NW 52 CT			1				
	LAUDERDALE FL		4 CITY-S	T-ZIP			□ Change	Additio
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			.2 NAME					
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r-ST-ZIP	y that the information supplied with this filing doe:		4 CIPY-S					

Country

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