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

**PROFIT CORPORATION ANNUAL REPORT** 

1997

Principal Place of Business 3955 FLORIDA BOULEVARD



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V62155

(9)

CABANA LAUNDROMAT SERVICE, INC.

3955 FLORIDA BOULEVARD

Mailing Address

## **FILED** May 01 1997 8:00am Secretary of State



PAUM BEAUN O	BARDENS FL	PALM	PALM BEACH GARDENS FL 33410-2213										
									3. Date Incorporated or Qualific 09/04/1992		ate of La <b>24/19</b> {	st Report	
2. Principal Pla	ace of Busin	2a. Ma	2a. Mading Address					4. FEI Number			Applied For		
21			26	26					65-0356731			Not Applicable	
Sulte, Apt. #, etc.				Suite, Apt. #, etc.					5. Certificate of Status Desired		\$8.75 Additional Fee Required		
City & State				City & State					6. Election Campaign Financing	9	<b>\$5.00</b> May Be		
23			28	28					Trust Fund Contribution			ied to Fees	
Zip		Country	Zij	Z(p) Cou			intry		8. This corporation has liability	for intangible	tax und	er s. 199.032,	
24		25				30			Florida Statules 省 Yes 🗌 No				
	9. Name	and Address of Curre	nt Registere	d Agent		- l,			10. Name and Address of New	Registered	Agent		
PERSAUD, PATRICK R.						81 Name							
412 CYPRESS DRIVE						82	82 Street Address (P.O. Box Number is Not Acceptable)						
LAKE													
						83							
						84	City				85	Zip Code	
						04	City			FL	.   3	Lip Code	
office or re	adstered ad	ons of Sections 607.05 ent, or both, in the Stat th, and accept the obli	e of Florida. :	Such change was	authori:	zed by	the corpo	corpor oratio	ation submits this statement for t o's board of directors. I hereby a	he purpose o ocept the app	I changi jointmer	ng its registered t as registered	
	Signature, typed	or printed name of registered a	<u> </u>				ant signature r	required	when reinstating)	DATE	, DIDEO	7000 11 10	
12.		OFFICERS A	ND DIRECTO		13				ADDITIONS/CHANGES TO O	FFICERS AND	Cha		
TITLE	D	DATRICK D		DELETE		TITLE					L CIII	iĝe 🗀 Madidon	
NAME		), PATRICK R.				NAME							
STREET ADDRESS		ress drive					ADDRESS						
CITY-ST-ZIP	LAKE PA	RN FL		Dilitit		CITY-S	1 - ZIP				Cha	nge Addition	
TITLE	D	D400404 F		☐ DELETE		1111.6						ige Addition	
NAME		D, BARBARA E.				NAME							
STREET ADDRESS		RESS DRIVE					ADDRESS						
CITY-ST-ZIP	LAKE PA	MK PL		T bei ere		4 C(1Y - )	S1 - ZIP				T 05-	nge Addition	
TITLE				DELETE		TILE					L_ Cha	nge L Addition	
NAME					3 2	P NAME							
STREET ADDRESS					30	STREET	ADDRESS						
CITY-ST-ZIP						LCITY-	SI - ZIP						
TITLE				DELETE	4	TITLE					Cha	nge Addition	
NAME					4	2 NAME							
STREET ADDRESS					4:	B STREET	ADDRESS						
CITY-ST-ZIP					4	4 City - S	IT - ZIP						
TITLE				☐ DELETE	5	TITLE					∐ Cha	nge Addition	
NAME					5	2 NAME							
STREET ADDRESS					5	STREE!	ADDRESS						
CITY-ST-ZIP					5	1 CITY - S	T-ZIP		-				
TITLE				DELETE	6	1 TALE					Cha	nge 🔲 Addition	
NAME					6:	2 NAME							
STREET ADDRESS					6	STREET	ADDRESS						
CITY-ST-ZIP	٠					4 CHY-S							
14. I do hereb Information	n indicated ( ficer or direc	on this annual report or	r supplement or the receive	al annual report is er or trustee embo	true an wered t	d accu	urate and	that n	n Section 119.07(3)(i), Florida Sta ny signature shall have the same as required by Chapter 607, Flori	legal effect a	s il mad	e urider oath; that	

I ERS AUD