2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 19, 2002 8:00 am
Secretary of State
05-19-2002 90033 042 ***150.00

DOCUMENT # L02438

1. Entity Name
HICKS LAUNDRY EQUIPMENT CORP.

Principal Place of Business	Mailing Address
3300 28TH ST NORTH SAINT PETERSBURG FL 33713 US	3300 28TH ST NORTH SAINT PETERSBURG FL 33713 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
4475 28th Street North	4475 28th Street North
Suite, Apt. #, etc. —	Suite, Apt. #, etc. —
City & State: St. Petersburg, FL ~~Florida~~	City & State: St. Petersburg, Florida
Zip: 33714	Zip: 33714
Country: USA	Country: USA

4. FEI Number 59-2963064 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CALUDA, MARLA H
4201 13TH WAY NE
SAINT PETERSBURG FL 33703

7. Name and Address of New Registered Agent

Name

~~Street Address (P.O. Box Number is Not Acceptable)~~

City **FL** Zip Code

8. 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 Marla H Calude Marla H. Calude 4/25/02
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After May 1, 2002 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	COB HICKS, DAVID C. 1353 87TH AVE. NO. ST. PETERSBURG FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ST HICKS, LINDA L. 1353-87TH AVE. NO. ST. PETERSBURG	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PV CALUDA, MARLA H 4201 13TH WAY NE SAINT PETERSBURG FL 33703	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E034 (9/01)

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Marla H Calude Marla H. Calude 4/25/02 (727)522-0644
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #