2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address,

FILED DOCUMENT # 235170 Sep 11, 2000 8:00 am Secretary of State 1. Entity Name QUICK-CLEANERS INC 09-11-2000 90075 003 ***550.00 Principal Place of Business Mailing Address 740 PALMÉR AVE. 740 PALMER AVE. WINTER PARK FL 32789 WINTER PARK FL 32789 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt, #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-0899644 Not Applicable Zip Country Ζip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name TUCKER, JR., J. WALTER Street Address (P.O. Box Number is Not Acceptable) 740 PALMER AVE. WINTER PARK FL 32789 City .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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$550.00 10. Election Campaign Financing **\$5.00** May Be After SEPTEMBER 13, 2000 Min. will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. DPC DS TITLE ☐ Change X Addition TITLE: Delete John W. Tucker, III. NAME TUCKER, J W NAME STREET ADDRESS 1020 Keyes Ave STREET ADDRESS 740 PALMER AVE CITY-ST-ZIP CITY-ST-ZIP WINTER PARK FL Winter Park, FL 32789 ☐ Change ☐ Addition X Delete TITLE TITLE KRESSLY, MAURICE NAME NAME . STREET ADDRESS STREET ADDRESS 2922 1/2 JEFFERSON ST CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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