

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 19, 2002 8:00 am
Secretary of State
 05-19-2002 90059 040 ***150.00

0631028 FD

DOCUMENT # F33750

1. Entity Name
THRIFT HOUSE CLEANERS, INC.

Principal Place of Business
**2127 EDGEWOOD DRIVE
 LAKELAND FL 33803**

Mailing Address
**2127 EDGEWOOD DRIVE
 LAKELAND FL 33803**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2120431

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MARGEL, JR, RAYMOND
 3008 WILLOW AVE
 LAKELAND FL 33803**

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

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 **P** ☐ Delete
 NAME **MARGEL, JR. R**
 STREET ADDRESS **3008 WILLOW AVENUE**
 CITY-ST-ZIP **LAKELAND FL**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **ST** ☐ Delete
 NAME **MARGEL, MERRILEE**
 STREET ADDRESS **1417 ORANGEWOOD DRIVE**
 CITY-ST-ZIP **LAKELAND FL**

TITLE ☒ Change ☐ Addition
 NAME **MARGEL, MERRILEE**
 STREET ADDRESS **5310 VERANA CT**
 CITY-ST-ZIP **LAKELAND FL 33813**

TITLE **VP** ☐ Delete
 NAME **MAREEL, RAY**
 STREET ADDRESS **14170 RANGWOOD DR**
 CITY-ST-ZIP **LAKELAND FL**

TITLE ☒ Change ☐ Addition
 NAME **MARGEL, RAY**
 STREET ADDRESS **5310 VERANA COURT**
 CITY-ST-ZIP **LAKELAND, FL 33813**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
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TITLE ☐ Change ☐ Addition
 NAME
 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
Raymond Margel Jr.
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/27/02 863-665-7870
 Date Daytime Phone #

CR2E034 (9/01)