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

**PROFIT** CORPORATION ANNUAL REPORT

1998

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

**DOCUMENT #**1. Corporation Name

(0)

Mailing Address

J & R MANNO UNIFORMS, INC.

**FILED** 

Apr 16 1998 8:00am

Secretary of State

% JERRY F. MANNO 8041 B. KIMBERLEY BLVD. N. LAUDERDALE FL 33088	% JERRY F. MANNO 6041 B. KRIBERLEY BLVD. N. LAUDERDALE FL 33068		DO NOT WRITE IN THIS S 3. Date Incorporated or Qualified 06/26/1984	SPACE				
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For				
21 3115 LAKE WORTH ROAD	26 8826 N.W.204	MANOR	59-2433955	Not Applicable				
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required				
City & State 23 LAKE WORTH FL	City & State  28 CORAL SPRINGS	FL	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees				
Zip Country 24 3346/ 25 BROWARD	29 3307/ 30 /	UNTRY BROWARD		X Yes No				
9, Name and Address of Curren	t Registered Agent	10. Name and Address of New Registered Agent						
MANNO, JERRY F. 6041 B. KIMBERLEY BLVD. N. LAUDERDALE FL 33068		81 Name  82 Street Address (P.O. Box Number is Not Acceptable)						
		83						
		84 City	FL	85 Zip Code				
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.								
SIGNATURE Signature, hypod or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating)  DATE								

SIGNATURE					
	Signature, tysiod or printed name of registered agent and title if applicable	(NOTE: Re	<del></del>	required when reinstating) DATE	
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECT	
TITLE		DELETE	1.1 TITLE	☐ Chan	ge 🔲 Addition
NAME	MANNO, JERRY		1.2 NAME		
STREET ADDRESS	8826 N.W. 20TH MANOR		1.3 STREET ADDRESS		
CITY-ST-ZIP	CORAL SPRINGS FL		1.4 CITY-ST-ZIP		
TITLE	VPD □	DELETE	2.1 TITLE	Chan	ge 🔲 Addition
NAME	MANNO, RUTH		2.2 NAME		
STREET ADDRESS	8826 N.W. 20TH MANOR		2.3 STREET ADDRESS		
CITY - ST - ZIP	CORAL SPRINGS FL		2. 4 CITY-ST-ZIP		
TITLE		DELETE	3.1 TITLE	☐ Chan	ge Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY - ST - ZIP		
TITLE		DELETE	4.1 TITLE	☐ Chan	ge 🔲 Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY - ST - ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE	☐ Chan	ge 🔲 Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		DELETE	6.1 TITLE	☐ Chan	ge
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

4-9-98