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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Jan 30 1997 8:00am

Secretary of State

1/20/97 (305) 425-0039

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K75004

(7)

BENDINGER BROTHERS UNIFORMS, INC.

SIGNATURE: Joseph J Bendinger P/S/T

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICEROR DIRECTOR

Principal Place of Business			Mailing Address						
% JOSEPH BENDINGER 3191 SW 11TH ST #4 DEERFIELD BCH FL 33441		318	% JOSEPH BENDINGER 3181 SW 11TH ST ∌4 DEERFIELD BCH FL 33442-8158						
Section (LLS)						 Date Incorporated or Qualified 03/23/1989 		of Last R 0/1996	eport
2. Principal Pla	ace of Business	28.	Mailing Address			4. FEI Number			oplied For
21		26				65-0115124			t Applicable
Suite, Apt #	t, etc.	27	Suite, Apt. #, etc			5. Certificate of Status Desired		\$8.75 / Fee Re	
City & State			City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip	Country		Zip	Count	ту	B. This corporation has liability for	or intangible ta	x under s	. 199.032,
24	25	29		30		Florida Statutes	☐ Yes 🔀		
	g. Name and Address of Cu	rrent Regist	ered Agent			10. Name and Address of New	Registered A	pent	
BEN	DINGER, JOSEPH			8	1 Name				
155 S. OCEAN BLVD., UNIT 114					82 Street Address (P.O. Box Number is Not Acceptable)				
BOCA RATON FL 33432									
				8	3				
				8	4 City			85 Zip	Code
					1 1		FL		
office or re	o the provisions of Sections 607 ogistered agent, or both, in the S in familiar with, and accept the o	tate of Florid	ia. Such change was	authorized:	by the corpor	rporation submits this statement for th ation's board of directors. I hereby ac	cept the appo	ntment as	registered
	Signature, typon or printed name of registere				gent signature req	uired when reinstating)	DATE		
12.		AND DIREC		13.	· · · · · · · · · · · · · · · · · · ·	ADDITIONS/CHANGES TO OF			
TITLE	PST		☐ DELETE	1.1 TITLE			L	Change	Addition
NAME	BENDINGER, JOSEPH			1.2 NAM					
STREET ADDRESS	155 S OCEAN BLVD #114			1.3 STRE	et address				
DITY - ST - ZIP	BOCA RATON FL			1.4 CITY				7 8.	F 4 1 22
THILE			☐ DELETE	2.1 TITLI			1	Change	Addition
NAME				2.2 NAM	E				
STREET ADORESS				2.3 \$TRE	ET ADDRESS				
CIFY - S1 - ZIP				2. 4 CITY	-ST-ZIP				
TITLE			☐ DELETE	3.1 TITU			l	Change	Addition
NAME				3.2 NAM	E				
STREET ADDRESS				3.3 STRE	ET ADDRESS				
CITY-ST-ZIP				3.4. CIT	r-ST-ZIP				
TITLE			DELETE	4.1 TITL	E		[Change	Addition
NAME				4. 2 NAA	AE .				
STREET ADDRESS				43 STRI	ET ADDRESS				
CITY-S1-ZIP				4.4 CITY	- ST- ZIP				
TITLE			DELETE	5 1 TITL	E			Change	Addition
NAME				5.2 NAM	E !				
STREET ADDRESS				5.3 STR	EET ADORESS				
CITY-SI-7IP				5.4 CITY	-ST-ZIP				
TITLE			☐ DELETE	6.1 TITE				Change	Addition
NAME				6.2 NAM	IE				
STREET ADDRESS					EET ADDRESS				
City-ST-ZiP					-ST-ZIP				
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14. I do 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.