2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

P0000009092

1. Entity Name

CITY LINEN CORPORATION



FILED Feb 24, 2003 8:00 am Secretary of State

02-24-2003 90172 029 ***150.00

							TE ST		
Principal Place of Business 117-119 N.E. 1ST STREET MIAMI FL 33132 ;			Mailing Address 117-119 N.E. 1ST STREET MIAMI FL 33132						
2. Principal Place of Business				3. Mailing Address					
Suite, Apt.	#, etc.		Suite, Apt. #, etc.					☐ CHECK HERE IF MAKING CHANGES	
City & State			City & State					4 EEL Number	
Zip Country			Zip - Count			itrv		65-0981576 Not Applicable 5 Continue of Status Period S8.75 Additional	
		,			· ,		9. Certificate of Status Desired Fee Required		
6. Name and Address of Current Registered Agent						7. Name and Address of New Registered Agent			
CAMPBELL, JEANNETTE						Cannotte Campbell Conec			
10028 SW 16TH STREET						Street A	ddress (P.	(P.O. Box Number is Mox Acceptable)	
PEMBROKE PINES FL 33025 Alemba							profe Hines # 33025		
							10.00	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. I am familiar with, and accept the obligations of registered agent.									
" Munita madell Comme									
SIGNATURE Constitute typed or printed name of registered agent any file if applicable. (NOTE: Registered Agent signature required when reinstating) DATE									
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State								9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees	
10.		OFFICERS AND	DIRECTO	I DRS	11.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	D	1011ALINAD 4		☐ Delete	TITLE			☐ Change ☐ Addition	
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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 employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIG

305-372-0082

Date