

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P01000030341

**FILED**  
**Feb 03, 2009**  
**Secretary of State**

**Entity Name:** RIO'S DRYCLEANING TO GO, INC.

**Current Principal Place of Business:**

4035 W HILLSBOROUGH AVE  
TAMPA, FL 33614

**New Principal Place of Business:**

2214 N. WASHINGTON BLVD.  
SARASOTA, FL 34234

**Current Mailing Address:**

4035 W HILLSBOROUGH AVE  
TAMPA, FL 33614

**New Mailing Address:**

2214 N. WASHINGTON BLVD.  
SARASOTA, FL 34234

**FEI Number:** 59-3749906

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

SEGALL, LARRY M  
3321 HENDERSON BOULEVARD  
TAMPA, FL 33609 US

**Name and Address of New Registered Agent:**

DRY CLEANING TO GO  
2214 N. WASHINGTON BLVD.  
SARASOTA, FL 34234 US

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: SHARON DAVIES

02/03/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DPST ( ) Delete  
Name: DAVIES, SHARON  
Address: 8915 30TH STREET E  
City-St-Zip: PARRISH, FL 34219

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DPST (X) Change ( ) Addition  
Name: DAVIES, SHARON  
Address: 2214 N. WASHINGTON BLVD.  
City-St-Zip: SARASOTA, FL 34234

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SHARON DAVIES

PRES

02/03/2009

Electronic Signature of Signing Officer or Director

Date