

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 12, 2003 8:00 am**  
**Secretary of State**

02-12-2003 90089 043 \*\*\*150.00

**DOCUMENT # P01000061043**

1. Entity Name  
**BOCA'S PREMIER DRY CLEANERS, INC.**



Principal Place of Business  
**7050 W PALMETTO PARK RD  
BOCA RATON FL 33433**

Mailing Address  
**7050 W PALMETTO PARK RD  
BOCA RATON FL 33433**



2. Principal Place of Business  
**7050 W. PALMETTO PK. RD**

3. Mailing Address  
**SAME**

Suite, Apt. #, etc.

**# 19**

Suite, Apt. #, etc.

**# 19**

City & State

**BOCA RATON, FL**

City & State

**SAME**

4. FEI Number **65-1124838**

Applied For

Not Applicable

Zip

**33433**

Country

**USA**

Zip

**SAME**

Country

**SAME**

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

☐ CHECK HERE IF MAKING CHANGES

## 6. Name and Address of Current Registered Agent

**MOROSINI, GREGG  
7050 W PALMETTO PARK RD  
BOCA RATON FL 33433**

## 7. Name and Address of New Registered Agent

Name  
**GREGG MOROSINI**

Street Address (P.O. Box Number is Not Acceptable)

**7050 W PALMETTO PK RD.**

**# 19**

City

**BOCA RATON**

**FL**

Zip Code

**33433**

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**1/6/03**

**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  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

## 10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete  
NAME **MOROSINI, GREGG**  
STREET ADDRESS **7050 W PALMETTO PARK RD**  
CITY-ST-ZIP **BOCA RATON FL 33433**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **GREGG MOROSINI** ☒ Change ☐ Addition  
NAME  
STREET ADDRESS **7050 W. PALMETTO PK RD.**  
CITY-ST-ZIP **# 19 BOCA RATON, FL 33433**

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

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

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CITY-ST-ZIP

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **GREGG MOROSINI** **1/6/03** **(954) 487-7336**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)