Sep 17, 2003 8:00 am

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

Secretary of State P01000066130 DOCUMENT # 09-17-2003 90019 042 ***750.00 1. Entity Name IMPRESSIONS DRY CLEANERS, INC. Principal Place of Business Mailing Address 4133 N. FEDERAL HWY. 4133 N. FEDERAL HWY. **BOCA RATON FL 33431 BOCA RATON FL 33431** 2. Principal Place of Business 3. Mailing Address 6-201 N. Federal Uhn 6301 N LEDEGUS YN Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State RATONS City & State Applied For 4. FE! Number 65-1127496 Baca baloar Not Applicable ^{Zip} 334 & S 25you B CA \$8.75 Additional 333462 5. Certificate of Status Desired acin BCA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name DICKENSON, DAVID B ESQ Street Address (P.O. Box Number is Not Acceptable) 980 N. FEDERAL HWY., STE. 410 **BOCA RATON FL 33432** City 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing \$5.00 May Be After September 10, 2003 Fee will be \$750.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 Change TITLE ☐ Delete Addition TITLE AVERILL, PETER C NAME NAME 620) N. FEDEROLHWY. 4133 N. FEDERAL HWY. STREET ADDRESS STREET ADDRESS **BOCA RATON FL 33431** CITY-ST-ZIP CITY-ST-7IP BOKA RATION IT 33/65 Change TITLE D ☐ Delete TITLE ☐ Addition AVERILL. JUNE M NAME NAME 6201 N. FEDERDI HWY 4133 N. FEDERAL HWY. STREET ADDRESS STREET ADDRESS **BOCA RATON FL 33431** CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Addition TITLE AVERILL, PETER C II NAME NAME 6201 N. FEDERAL HWY 4133 N. FEDERAL HWY. STREET ADDRESS STREET ADDRESS **BOCA RATON FL 33431** CITY-ST-ZIP BOLA RATOW, FL 33485 CITY-ST-ZIP TITLE □ Delete TITLE □☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF ☐ Delete TITLE TITLE □ Change □ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 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 convoration or the receiver or trustee amplywered 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

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTO

9/15/03 50

561- 988.3030

Davtime Phone #