2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Feb 07, 2005 8:00 am Secretary of State DOCUMENT # P03000131412 1. Entity Name --02-07-2005 90065 049 ***150.00 SCRUBS 4 U. INC. Principal Place of Business Mailing Address 3333 SO. ORANGE AVENUE 3333 SO. ORANGE AVENUE SUITE 104 ORLANDO FL 32806 SUITE 104 ORLANDO FL 32806 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (10/04) Applied For City & State City & State 4. FEI Number 35-2219398 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent GERBIG, RAMONA D Street Address (P.O. Box Number is Not Acceptable) 3618 MÓLONA DRIVE ORLANDO FL 32837 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 FILE NOW!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11 TITLE TITLE ☐ Delete GERBIG, RAMONA D NAME 14734 Braddock Oak Drive 3618 MOLONA DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ORLANDO FL 32837 CITY-ST-ZIP VTD ☐ Addition ☐ Delete TITLE TITLE GERES, KATHY NAME NAME STREET ADDRESS STREET ADDRESS 3012 CRYSTAL CREEK BLVD. ORLANDO FL 32837 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Addition Change TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CHTY-ST-7IP CITY-ST-ZIP ☐ Addition ☐ Change ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-S1-ZIP ☐ Change Addition ☐ Delete TITLE **TITLE** NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 peceiver 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

with all other like empowered.

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