2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000042874

Entity Name: UNIFORM CENTER USA, INC.

FILED Mar 03, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 18393 N.W. 27TH AVENUE 18393 NW 27TH AVENUE OPA-LOCKA, FL 33056 OPA-LOCKA, FL 33056 **Current Mailing Address: New Mailing Address:** 18393 N.W. 27TH AVENUE 18393 NW 27TH AVENUE OPA-LOCKA, FL 33056 OPA-LOCKA, FL 33056 FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired () Name and Address of New Registered Agent: Name and Address of Current Registered Agent: MOHAMMAD, AMIN MOHAMMAD, AMIN 18393 NW 27TH AVENUE 18393 N.W. 27TH AVENUE OPA-LOCKA, FL 33056 OPA-LOCKA, FL 33056 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: AMIN MOHAMMAD 03/03/2009 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 P () Delete
 Title:
 () Change () Addition

 Name:
 MOHAMMAD, AMIN
 Name:

 Address:
 18393 N.W. 27TH AVENUE
 Address:

 City-St-Zip:
 OPA-LOCKA, FL 33056
 City-St-Zip:

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: AMIN MOHAMMAD P 03/03/2009