

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 24, 2005 8:00 am**  
**Secretary of State**

03-24-2005 90048 029 \*\*\*158.75

**DOCUMENT # P04000056382**

1. Entity Name  
**UNIFORMS INC.**



Principal Place of Business  
**14219 WALSINGHAM RD  
STE A  
LARGO, FL 33774**

Mailing Address  
**14219 WALSINGHAM RD  
STE A  
LARGO, FL 33774**

**50030567**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03172005

Chg-P

CR2E034 (10/03)

City & State

City & State

4. FEI Number

**571 204 225**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☒ **\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

**GREENBERG, DAVID  
14219 WALSINGHAM RD  
STE A  
LARGO, FL 33774**

7. Name and Address of New Registered Agent

Name

**JOHN M PASHEILICH**

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

**14219 WALSINGHAM RD  
STE A**

City

**LARGO**

**FL**

Zip Code

**33774**

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

*John M Pasheilich President* **JOHN M PASHEILICH** **Pres.** **3-21-05**

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

10. OFFICERS AND DIRECTORS

TITLE **P** ☒ Delete  
NAME **GREENBERG, IRENE**  
STREET ADDRESS **14219 WALSINGHAM RD STE A**  
CITY-ST-ZIP **LARGO, FL 33774**

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 **P** ☒ Change ☒ Addition  
NAME **JOHN M PASHEILICH**  
STREET ADDRESS **14219 WALSINGHAM RD STE A**  
CITY-ST-ZIP **LARGO FL 33774**

TITLE **S** ☐ Change ☒ Addition  
NAME **JOYCE A PASHEILICH**  
STREET ADDRESS **14219 WALSINGHAM STE A**  
CITY-ST-ZIP **LARGO FL 33774**

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

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

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
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

*John M Pasheilich* **JOHN M. PASHEILICH** **President**