

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000019384

FILED
Apr 30, 2008
Secretary of State

Entity Name: PB UNIFORMS & MEDICAL SUPPLIES, CORP.

Current Principal Place of Business:

931 MILANO CIRCLE
APT 104
BRANDON, FL 33511

New Principal Place of Business:

12809 STANDBRIDGE DRIVE
RIVERVIEW, FL 33579

Current Mailing Address:

931 MILANO CIRCLE
APT 104
BRANDON, FL 33511

New Mailing Address:

12809 STANDBRIDGE DRIVE
RIVERVIEW, FL 33579

FEI Number: 14-1932204

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PENALOZA BALDA, JOSE L JR.
703 PROVIDENCE TRACE CIRCLE
304
BRANDON, FL 33511 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PENALOZA, INGRID
Address: 931 MILANO CIRCLE APT 104
City-St-Zip: BRANDON, FL 33511

Title: VP () Delete
Name: PENALOZA, JOSE L SR.
Address: 931 MILANO CIRCLE APT 104
City-St-Zip: BRANDON, FL 33511

Title: VP () Delete
Name: PENALOZA BALDA, JOSE L JR.
Address: 703 PROVIDENCE TRACE CIRCLE, # 304
City-St-Zip: BRANDON, FL 33511

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PENALOZA, INGRID
Address: 12809 STANDBRIDGE DRIVE
City-St-Zip: RIVERVIEW, FL 33579

Title: VP (X) Change () Addition
Name: PENALOZA, JOSE L SR.
Address: 12809 STANDBRIDGE DRIVE
City-St-Zip: RIVERVIEW, FL 33579

Title: () Change () Addition
Name:
Address:
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: JOSE LUIS PENALOZA SR.

VP

04/30/2008

Electronic Signature of Signing Officer or Director

Date