FILED

2003 FOR PROFIT CORPORATION

Apr 28, 2003 8:00 am **UNIFORM BUSINESS REPORT (UBR)** Secretary of State P93000028073 **DOCUMENT #** 04-28-2003 90493 050 ***150.00 BAYSHORE UNIFORM RENTAL, INC. Principal Place of Business 6127 26TH STREET WEST Mailing Address 6127 26TH STREET WEST **BRADENTON FL 34207 BRADENTON FL 34207** 3. Mailing Address 2. Principal Place of Business 3080 GRAND BAY BLVD 3080 GRAND BAY BLUD Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES APT # 511 APT # 511 City & State City & State 4. FEI Number Applied For 65-0402642 LON61304T LONGBOAT KEY, FL Not Applicable Zin Country \$8.75 Additional 5. Certificate of Status Desired 34278 34228 MANATEE HANATEE Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Rubinstein. Jon L Street Address (P.O. Box Number is Not Acceptable) 3080 GRAND BAY 3Lリカ 6127 26 ST. WEST RADENTON FL 34207 Zip Code 3 42,28 City LONGBOAT KEY bove 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 bligations of registered agent, RUBINSTEN FILE NOW! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE TITLE ☐ Delete RUBINSTEIN, JON L NAME NAME 3080 GRAND RAY BLUD, #511 6127 26TH ST. WEST STREET ADDRESS STREET ADDRESS **BRADENTON FL 34207** CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ 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-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE □ Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete Change ☐ Addition 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 proof is true and accurate and that my lignature 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 attachiment with any address, with a) other like empowered.

SIGNATURE: