

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

0049280 AV

DOCUMENT # P93000032902

1. Entity Name  
PEARL LINEN INC.



FILED  
03 JUL -2 PM 1:26  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business  
191 HWY 98  
EASTPOINT FL 32328  
US

Mailing Address  
PO BOX 1107  
EASTPOINT FL 32328  
US



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 59-3180755

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WOOLEVER, JAYSON  
191 HWY 98  
EASTPOINT FL 32328

Name

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

City

FL

Zip Code

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

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2003 Fee will be \$550.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P  
NAME WOOLEVER, JAYSON  
STREET ADDRESS 191 HWY 98  
CITY-ST-ZIP EASTPOINT FL 32328 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition  
500021406355  
07/09/03--01009--005 \*\*150.00

TITLE VP  
NAME WOOLEVER, JARRETT  
STREET ADDRESS 191 HWY 98  
CITY-ST-ZIP EASTPOINT FL 32328 ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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

TITLE  
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STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
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CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Change ☐ Addition

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STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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

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:

**SIGNATURE REQUIRED**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6-19-03 860-670-8703  
Date Daytime Phone #

CR2E034 (10/02)

Attachment #



**Pearl Linen, Inc.**

Commercial Linen Supply

PA 3000032902

June 19, 2003

To Whom It May Concern:

Between Jan. & March of this year all of our tax-related items went into a large envelope and was given to the CPA at the end of March. The CPA ultimately filed an April 15<sup>th</sup> extension with the IRS and just opened the envelope to begin our taxes.

Whoops; this was in the envelope. Enclosed are the Corporation Business Report and a check for \$150.00. We hope you will forgive the \$400.00 delinquent fee.

Thank You,

Jay Woolever  
President