FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P96000069852 (7)

KELLY'S UNIFORMS, INC.

Principal Place of Business	Mailing Address
18170 LAKE WORTH BOULEVARD	18170 LAKE WORTH BOULEVARD
PORT CHARLOTTE FL 33948	PORT CHARLOTTE FL 33948

FILED Mar 11 1998 8:00am Secretary of State



Principal Place of Business Mailing Address									I IRBIIBUR IIU IUIN DIERI UDAN UDAN GUN	11 BO448 B1410	I BI WI FERWI WIT	10 1101 1001	
18170 LAKE WORTH BOULEVARD PORT CHARLOTTE FL 33948 18170 LAKE WORTH BOULEV PORT CHARLOTTE FL 33948							DO NOT WRITE IN THIS SPACE						
							F	3.	Date Incorporated or Qualified				
							- 1		08/19/1996				
2. Principal Pi	ace of Business	2a. Maili	ng Address			-		4.	FEI Number		A	oplied For	
21		26							65-0688591			ot Applicable	
Suite, Apt.	#, etc.	Suite	Suite, Apt. #, etc.					5.	Certificate of Status Desired			Additional	
22		27										equired	
City & State	•	<u></u>	City & State						Election Campaign Financing			May Be	
23			28						Trust Fund Contribution	<u> </u>		to Fees	
— Zip ──┐	Country	Zip	, 				1	 This corporation owes or has paid the of Personal Property Tax due June 30. 			Yes No		
24	9. Name and Address of Current	29 Posistered	Agont	30	ſ				Name and Address of New Re			1 140	
		nagisterau	Agent		81	Name		10.	Hallie Bild Address of Note Fie	gisto, ou A	90111		
	PRICH, KELLY ANN												
	70 LAKE WORTH BOULEVARD				82	Street	Address	s (P.	O. Box Number is Not Acceptat	ile)			
PUI	RT CHARLOTTE FL 33948				63								
					84	City				FL	85 Zip	Code	
44 Duramont	to the provisions of Continue 607 (1502	and 607 15	ná Florida Statut	or the o	2006	-namer	d corners	ation	submits this statement for the r		changing i	ts registered	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.													
SIGNATURE													
Signature, typed or printed name of registered agent and tille it applicable. (NOTE: Regis 12. OFFICERS AND DIRECTORS						nt signatur	re required w		reinstating) ADDITIONS/CHANGES TO OFFIC	DATE CERC AND	DIRECTOR	28 INI 10	
12.	D OFFICERS AND	DIRECTOR	DELETE	13. 1.1 TI	TI E		1		ADDITIONS/CHANGES TO OFFIC		Change	Addition	
NAME	ALDRICH, KELLY ANN									•			
MARIA LAWRINGSPIL BOLL PLANS					1.2 NAME 1.3 STREET ADDRESS								
STREET ADDRESS	PORT CHARLOTTE FL 33948	IND		1.4 CI			1						
CITY-ST-ZIP TITLE	D		DELETE	2.1 TI		1.71	 				Change	Addition	
NAME	ALDRICH, ERIC			2.2 N			İ				_ •		
STREET ADDRESS	18170 LAKE WORTH BOULEV	IRD.				ET ADDRESS							
CITY-ST-ZIP	PORT CHARLOTTE FL 33948	u 10		2.40									
TITLE	TOTAL CHIEF TE 00040		DELETE	3.1 TI		11-24	 				Change	☐ Addition	
NAME				3.2 N							-		
STREET ADDRESS	cc			3.3 STREET AL									
CITY-ST-ZIP				3.4. CITY-ST-ZIP								ė	
TITLE	DELETE		_	4.1 TITLE		 				Change	☐ Addition		
NAME			4.2 N	4. 2 NAME									
STREET ADDRESS				4.3 ST	4.3 STREET ADDRESS							i	
CITY-ST-ZIP					4.4 CITY-ST-ZIP								
TITLE	DELETE				5.1 TITLE						Change	☐ Addition	
NAME			5.2 N	5.2 NAME									
STREET ADDRESS				5.3 ST	REET	ADDRESS			•				
CITY-ST-ZIP				5.4 CI					•				
TITLE			DELETE	6.1 TI							Change	☐ Addition	
NAME	•			6.2 N	ME								
STREET ADDRESS			-	6.3 \$1	AEET	ADDRESS							
CITY-ST-ZIP				6.4 CI									
									a 110 07/2)(i) Florido Protutos I	Z	id . Al- ad the	lafa an atlan	

14. 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 informatio indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

Albanasah

9111.129.7884