2001 UNIFORM BUSINESS REPORT (UBR)

FILED May 11, 2001 8:00 am Secretary of State DOCUMENT # **P97000035502** 1. Entity Name DIXIE CLEANERS, INC. 05-11-2001 90004 038 ***150.00 Mailing Address Principal Place of Business 2301 N. PALAFOX STREET 2301 N. PALAFOX STREET PENSACOLA FL 32501 PENSACOLA FL 32501 2. Principal Place of Business 3. Mailing Address 2915 W. Navy Blvd Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-3465305 Not Applicable Jensa cola Country \$8.75 Additional Zip 5. Certificate of Status Desired Fee Required ---7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name GREENBLATT, JOSEPH E (P.O. Box Number is Not Acceptable) 5 W Nowy Blvd 2301 N. PALAFOX STREET PENSACOLA FL 32501 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. SIGNATURE required when reinstating Signature, typ FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Change Addition Delete President TITLE TITLE Arthur J. Vick NAME NAME GREENBLATT, JOSEPH E 2915 W Navy Blud STREET ADDRESS STREET ADDRESS 2301 N PALAFOX STREET CITY-ST-ZIP CITY-ST-ZIP Pensacola FL 32505 PENSACOLA FL 32501 Sec/Treasurer ★ Addition Delete TITLE ☐ Change TITLE Mary V. Hull NAME 2915 tis Navy Blud GREENBLATT, WILLIAM H NAME STREET ADDRESS STREET ADDRESS 2301 N PALAFOX STREET Pensacola FL 32505 CITY-ST-7IP CITY-ST-ZIP PENSACOLA FL 32501 Vice-Prestount Change X Addition TITLE ☐ Delete TITLE Gray N. Vick 2915 W. Navy Blud NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP Pensacola FL CITY-ST-ZIP ☐ Change ☐ Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIREC