2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED DOCUMENT # P98000091058 Apr 03, 2000 8:00 am Secretary of State PERFECTION CLEANERS AND LAUNDRY, INC. 04-03-2000 90125 025 ***150.00 Principal Place of Business Mailing Address 48-BEAL PKWY 48 BEAL-PKWY-FT. WALTON BOH FL 32549 FT. WALTON BCH PL 32548 2. Principal Place of Business 3. Mailing Address 49 Beal Pkwy 1432 Quail Ridge Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Fort Walton Beach, Fl City & State 4. FEI Number Applied For 59-3541469 Fl 32539 Crestview, Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired 32548 Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Jimmy Lundy -CADENHEAD, CHRIS Street Address (P.O. Box Number is Not Acceptable) <u>1432 Ouail Ridge</u> <420 E. PINE AVE. **GRESTVIEW FL 32539** Zip Code 32539 <u>Crestview, Fl</u> 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 Jimmy L. Lundy, President agent and title if applicable FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. XX Delete ☐ Addition TITLE TITLE President, Jimmy Lundy NAME NAME -blocker, darret 1432 Quail Ridge STREET ADDRESS STREET ADDRESS 698 HWY 90E Crestview, Fl 32539 CITY-ST-ZIP CITY-ST-ZIP CRESTVIEW FL 3253 Addition TITLE □ Change TITLE Delete NAME NAME TOWNLEY, CECIL A STREET ADDRESS STREET ADDRESS 49 BEAL PKWY NE CITY-ST-ZIP CITY-ST-ZIP FORT WALTON BEACH FL 32548 - Delete -74T1 E -Secretary/Treasurer-NAME NAME Carmen Lundy STREET ADDRESS STREET ADDRESS 1432 Quail Ridge CITY-ST-ZIP CITY-ST-ZIP Crestview. Fl 32539 ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS 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 450)