2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P9900004475 Jan 28, 2000 8:00 am Secretary of State SERVICE CLEANERS, INC. 01-28-2000 90087 023 ***150.00 Principal Place of Business Mailing Address 1304 8 AVENUE WEST 1304 8 AVENUE WEST PALMETTO FL 34221-3812 PALMETTO FL 34221 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. City & State City & State Applied For Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent <u>Eugene Boeglin</u> SPIEGEL & UTRERA, P.A. Street Address (P.O. Box Number is Not Acceptable) 1304 8th Ave. W. 343 ALMERIA AVENUE **CORAL GABLES FL 33134** Palmetto, 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 (NOTE: Registered Agent signature required when reinstating) 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, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. PTD ☐ Change ☐ Addition ☐ Delete TITLE **BOEGLIN, EUGENE** NAME 1304 8 AVENUE WEST STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP PALMETTO FL 34221 Change Delete ☐ Addition NAME **BOEGLIN, JOHN** NAME STREET ADDRESS 1304 8 AVENUE WEST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PALMETTO FL 34221 Change ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE 13. I hereby certify that the information supplied with this filling 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.