2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2009
Secretary of State

DOCUMENT# P99000025748

Entity Name: FLORIDA UNIFORMS & SUPPLIES, INC.

Current Principal Place of Business:

3501 SW 2 AVE
SUITE 2200
GAINESVILLLE, FL 32607

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 455
LAKE BUTLER, FL 32054

New Mailing Address:

FEI Number: 59-3566272 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PEREZ, LILIANA
655 E MAIN STREET
LAKE BUTLER, FL 32054 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: PEREZ, SALVADOR A
Address: 270 NE 8TH AVE
City-St-Zip: LAKE BUTLER, FL 32054

Title: STD ( ) Delete
Name: PEREZ, LILIANA M
Address: 420 NE 8TH AVE
City-St-Zip: LAKE BUTLER, FL 32054

Title: D ( ) Delete
Name: PEREZ, PATRICIO A
Address: 360 NE 8TH AVE
City-St-Zip: LAKE BUTLER, FL 32054

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LILIANA PEREZ STD 05/04/2009

Electronic Signature of Signing Officer or Director Date