OGO UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P99000082282 FILED SEUKETARY OF STATE ISTON OF CORPORATIONS 1. Entity Name BEST UNIFORM SERVICE, INC. 00 OCT 16 PM 3:29 Principal Place of Business Mailing Address 12391 MCGREGOR PALMS DRIVE 12391 MCGREGOR PALMS DRIVE FORT MYERS FL 33908 FORT MYERS FL 33908-3076 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite. Apt. #. etc. City & State City & State 5-09-5-0-2-7-8 Mot Applicable Zip Zιp Country \$8.75 Additional 5. Custingate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent PACE, DANIEL C Street Address (PO Boy Humber is Not Acceptable) 12391 MCGREGOR PALMS DRIVE FORT MYERS FL 33908 City Zip Code 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 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 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TIFLE ☐ Delete TITLE CR2E034 (9/99) ☐ Addition NAME PACE, DANIEL C NAME STREET ADDRESS 12391 MCGREGOR PALMS DRIVE STREET ADDRESS CITY-ST-ZIP FORT MYERS FL 33908 CITY-ST-ZIP E100 E TITLE Delete THTLE Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Adaption ☐ Change NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete ☐ Change noitibhA l'``L NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE □ Delete TITLE J Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete THE 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 receipter 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 addr SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Best Uniform Service Inc. 12391 McGregor Palms Dr. Fort Myers, Florida 33908

Phone 941-432-9422

Dear Sir:

It has come to my attention my corporation is administratively inactive. We filed the Uniform Business Report, but failed to list the FEI number. You sent a rejection letter to us but we failed to receive it do to our relocation back to Florida. We are sending you the original document with the corrections and a copy of the cancelled check in the amount of \$150.00 dollars. At this time we would ask your help in our reinstatement and to waive any fees due to our oversight. We do thank you for your help in this matter.

Note: We are not making any changes. The address should be: 12391 McGregor Palms Dr. Ft. Myers, Florida 33908.

Thank you

Daniel C. Pace

President

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