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May 07 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 495469 (9)
1. Corporation Name
SOUTHWEST SEWING CENTER & APPLIANCES, INC.



Principal Place of Business: 5744 S.W. 40TH ST. MIAMI FL 33155-5302
Mailing Address: 5744 S.W. 40TH ST. MIAMI FL 33155-5302

3. Date Incorporated or Qualified: 05/12/1976
3a. Date of Last Report: 02/20/1996

2. Principal Place of Business (21-24) and 4. FEI Number (25-28) section. Includes fields for Suite, Apt #, City & State, Zip, and Country. FEI Number: 59-1707832.

5. Certificate of Status Desired (8.75 Additional Fee Required) and 6. Election Campaign Financing (5.00 May Be Added to Fees) section.

9. Name and Address of Current Registered Agent (GOMEZ, JOSE, 5744 S.W. 40 STREET, MIAMI FL 33155) and 10. Name and Address of New Registered Agent (81-85) section.

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE: Signature, typed or printed name of registered agent and fee if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS and 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 section. Includes fields for Title, Name, Street Address, City-St-Zip, and checkboxes for Delete, Change, and Addition.

14. I do 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 annual report or supplemental annual 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 12 or Block 13, changed, or on an attachment with an address.

SIGNATURE: [Signature] JOSE A Gomez 4/29/97 305 665 8021
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0212354

CR2E034 (9/96)