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Apr 26, 1999 8:00 am  
Secretary of State

04-26-1999 90110 040 \*\*\*150.00

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PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F93000000671

1. Corporation Name

SOUTHERN LEATHER COMPANY OF ALABAMA

Principal Place of Business

274 MONROE  
MEMPHIS TN 38103

Mailing Address

274 MONROE  
MEMPHIS TN 38103

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified

02/10/1993

4. FEI Number

63-0268587

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax. ☒ Yes ☐ No

2. Principal Place of Business

21 Suite, /apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 P.O. Box 6

27 Suite, Apt. #, etc.

28 City & State

29 Zip Country

30 38101

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 Zip Code

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PVCD ☐ DELETE

NAME LOEWENBERG, WILLIAM I

STREET ADDRESS 274 MONROE  
CITY-ST-ZIP MEMPHIS TN 38103

TITLE V ☐ DELETE

NAME CARDOSI, L S

STREET ADDRESS 274 MONROE  
CITY-ST-ZIP MEMPHIS TN 38103

TITLE S ☐ DELETE

NAME NEWSOM, JOE

STREET ADDRESS 274 MONROE  
CITY-ST-ZIP MEMPHIS TN 38103

TITLE ☐ DELETE

NAME

STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

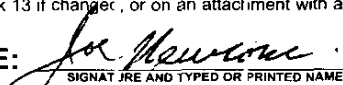
6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

 JOE NEWSOM, SECRETARY

4/23/99 901-525-1200  
Date Daytime Phone #

CR2E034 (11/98)