


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 03, 2004 8:00 am
Secretary of State

06-03-2004 90001 040 ***150.00

DOCUMENT # L32201

1. Entity Name
GENERAL SPINNING, INC.



Principal Place of Business
**721 W. 25TH ST.
 HIALEAH, FL 33010 US**

Mailing Address
**721 W. 25TH ST.
 HIALEAH, FL 33010 US**

34056411



2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

03182003 Chg-P CR2E034 (10/03)

City & State
 Zip Country

4. FEI Number
65-0172749

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**PERRY, CLIFTON H. SR.
 721 W 25TH ST.
 HIALEAH, FL 33010**

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** 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. I am familiar with, and accept the obligations of registered agent.

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

**FILE NOW!!! FEE IS \$150.00
 Due by September 8, 2004**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PERRY, CLIFTON H., SR. 1111 SW 128 DR DAVIE, FL <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VST PERRY, CLIFTON H JR 1750 W. 46 ST. HIALEAH, FL <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Clifton Perry Sr. **6/1/04** **305 888-6099**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Attachment

54056411

L 32201

General Spinning Inc

5 19 04

TO WHOM IT MAY CONCERN,

SOMETIME IN FEB '04 I RECEIVED

A NOTICE FOR ~~DIV. OF CORP. REPORT~~ I TOOK OFF
CARD AND SENT ~~CARD REQUESTING FORM~~

FOR THE REPORT. I NEVER RECEIVED IT.

I CONTACTED ~~DIV. OF CORP. OFFICE~~, WAS TOLD

TO SEND THIS ~~LETTER~~ WITH A CHECK

BY A LADY NAMED ~~PATRICIA~~. THANK YOU

FOR YOUR HELP. ~~NOTHING~~ HAS CHANGED

FROM LAST YEAR.

Clerk P-50.

Clifton Penney J.

V. Pres.