

FILE NOW: Fee after May 1, will be \$588.75

LIMITED LIABILITY COMPANY
ANNUAL REPORT
1997



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

FILED

97 APR 21 AM 8:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILING FEE
\$ 203.75 Annual Report \$100.00 + \$103.75 Corporation Supplemental Fee
Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1. Name and Mailing Address of Limited Liability Company
DOCUMENT # L95000000485

SUNSET EMBROIDERY, L.C.
153 NO. TAMiami TRAIL
OSPREY FL 34229

1a. Principal Place of Business Address
153 NO. TAMiami TRAIL
OSPREY FL 34229

mwb

If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2a.

2. Principal Place of Business SAME		2a. Mailing Address		3. Date Organized or Qualified 06/22/1995		3a. State of Formation FL	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number 65-0589223		<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
City & State		City & State		5. Date of Last Report 04/24/1996		6. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
Zip	Country	Zip	Country				

7. Name and Address of Current Registered Agent THOMAS, RON 4553 DEL SOL BLVD, SO. SARASOTA FL 34243				8. Name and Address of New Registered Agent			
				Name			
				Street Address (P.O. Box Number is Not Acceptable)			
				Suite, Apt. #, etc.			
				City		Zip Code	
				FL			

9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company 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 affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGR	THOMAS, RONALD I.	4553 DEL SOL BLVD., SOUTH	SARASOTA FL
MGR	THOMAS, DORIS P	4553 DEL SOL BLVD., SOUTH	SARASOTA FL

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11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an attachment with an address

SIGNATURE: **Ronald L. Thomas** 6.22.97 941.359883
Date Daytime Phone #