

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY -1 10 PM 4: 00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 489205

(5)

1. Corporation Name:

AZZE TEXTILE NOVELTY, INC.

Principal Place of Business

1036 SW FIRST ST
MIAMI FL 33130
US

Mailing Address

1036 SW FIRST ST
MIAMI FL 33130
US

100001504451
-06/02/95--01027--018
****200.00 ****200.00

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/10/1975

3a. Date of Last Report

05/01/1994

4. FEI Number

59-1627896

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. The corporation has liability for intangible tax under s. 118.032,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

21 1036 S.W. 1 ST.

2a. Mailing Address

26 Suite, Apt # etc

22 Suite, Apt # etc

27 Suite, Apt # etc

City & State

23 MIAMI FLA.

City & State

28 MIAMI FLA.

24 33130

25 US

29

30

9. Name and Address of Current Registered Agent

FL ANNUAL RPT SVCS
1036 SOUTHWEST FIRST STREET
MIAMI FL

10. Name and Address of New Registered Agent

81 Name
FLORIDA ANNUAL REPORT SERVICES, INC.

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

1036 S.W. 1 ST.

83

84 City

MIAMI

FL

05 Zip Code
33130

11. Pursuant to the provisions of Sections 607.0502 and 607.1506 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 provisions of Sections 607.0502 and 607.1506 Florida Statutes.

SIGNATURE

AMADA C. LOPEZ, PRES

4/25/95

(Signature of Registered Agent or Registered Agent's Representative)

(Signature of Registered Agent or Registered Agent's Representative)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD
NAME	AZZE, JORGE
STREET ADDRESS	921 WEST 46TH STREET
CITY, ST, ZIP	MIAMI FL
TITLE	D
NAME	AZZE, BELLA I
STREET ADDRESS	921 WEST 46TH STREET
CITY, ST, ZIP	MIAMI FL
TITLE	S
NAME	AZZE, JORGE S
STREET ADDRESS	5441 SW 84 TERR
CITY, ST, ZIP	MIAMI FL
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

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, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information submitted 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 of this report, or on an attachment with an address.

SIGNATURE:

PRES/DIR.

(Signature of Officer or Director)

4/25/95