## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000016687

Entity Name: AJ'S EMBROIDERY, INC.

SMALL, BARBARA

1641 FIELDFARE COURT

DUNEDIN, FL 34698 US

Name:

Address:

City-St-Zip:

FILED Mar 29, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1830 VENETIAN POINT DR. CLEARWATER, FL 33755 US **Current Mailing Address: New Mailing Address:** 1830 VENETIAN POINT DR. CLEARWATER, FL 33755 US FEI Number: 20-4262568 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SMALL, ALEXANDER J 1830 VENETIAN POINT DR. CLEARWATER, FL 33755 US 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. SIGNATURE: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PD( ) Delete () Change () Addition SMALL, ALEXANDER J Name: Name: 1830 VENETIAN POINT DR. Address: Address: City-St-Zip: CLEARWATER, FL 33755 US City-St-Zip: Title: VP D Title: () Delete () Change () Addition Name: SMALL, TERRY Name: 1641 FIELDFARS COURT Address: Address: DUNEDIN, FL 34698 US City-St-Zip: City-St-Zip: ( ) Delete Title: Title: () Change () Addition SMALL, MARILYN Name: Name: 1830 VENETIAN POINT DR. Address: Address: City-St-Zip: CLEARWATER, FL 33755 US City-St-Zip: Title: ( ) Delete Title: () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: ALEXANDER J. SMALL PD 03/29/2007