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	ANNUAL REPORT Secretary of Sta					FILEU LUNCTARY OF STA WISTON OF CORPORAT	ıt.	
•	1999 DIVISION OF CORF				IONS	AVIOLON OF CORPORAT	10 A E	
DOCU	MENT # 131989	9 /				99 JUL 26 PM 2: 4	5	
1, Corporatio	n Name					į		
EQU SE	WN PRODUCTS, INC.							
Principal Plac	e of Business	Mailing Address					TARIH OHANI OHANI I	TINH CHACL TANK
70 MARTINIQUE AVE. 70 MARTINIQUE AVE.								
Tampa FL 336 US	06-4039	TAMPA FL 33606-4039 US				DO NOT WRITE IN THE	00405	
05						DO NOT WRITE IN THIS 3. Date incorporated or Qualifed	SPACE	
						03/02/1936		
	Place of Business	2a. Mailing Addres	s			4. FEI Number	Ap	plied For
21		26			· 	59-0470940		t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, e	tc.			5. Certificate of Status Desired	\$8.75 A Fee Re	
City & Stai	te	City & State				6. Election Campaign Financing	\$5.00	
Zip	Country	Zip		Country		Trust Fund Contribution	Added t	o Fees
24	25	29	30	country		8. This corporation owes the current year Int Personal Property Tax.	angibie ∐Yes	□No
	g, Name and Address of Curre	ent Registered Agent				10. Name and Address of New Registered	Agent	
CAL	IL, M. WM.			81	Name			
	AARTINIQUE AVE.			82	Street A	ddress (P.O. Box Number is Not Acceptable)		
	IPA FL 33606	-		83				·
							-, ,	
				84	City	FL	85 Zip (Code
11, Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida e of Florida, Such change	Statutes, the	e above	named c	orporation submits this statement for the purpose of ration's board of directors. I hereby accept the appoint	changing its	registered
	m familiar with, and accept the oblig	ations of, Section 607.050	5, Florida S	statutes		ation's board of directors. I hereby accept the appoi		
SIGNATURE	Signature, typed or printed name of registered ag	ent and tille if applicable	(NOTE Regist	ared Agen	signature rec	guired when reinstating) DATE		
12.		ND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTO	RS IN 12
TITLE	PD	☐ DEL	TE 1.	.1 TITLE	1	800005925	i⊞dia⊗.	— □ A 3 d ton
NAME	SAUL, M. WILLIAM 70 MARTINIQUE AVE.			2 NAME	i	-08/06/990 ****150.00	JJ U53=~I	UZU
STREET ADORESS	TAMPA FL			3 STREET 4 City-St	1	****120.00	李孝不不 [;	50.00
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STREET ADDRESS			6	3 STREET	MUNICOS			

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 er on an attackment with an address, with all other like empowered.

SIGNATURE:

| SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE | SIGNATURE |

L & J SEWN PRODUCTS, INC. 70 Martinique Ave. Tampa, Fl. 33606-4039 Ph. 813-254-7242 Fax 813-259-0260

July 15, 1999

Katherine Harris Secretary of State

Dear Ms. Harris:

I have enclosed this letter in my Division of Corporations - Annual Filings in the hope that it will reach you.

Our company's report was sent in months later than originally intended. It is a small operation that is stuck with me as the only employee who can fill out these forms and I was out of action for most of Feb., Mar., and Apr.

What caused my inactivity was a by-pass on my right leg performed by Dr. George James at St. Joseph's Hospital on January 21, 1999. The recovery did not go as I planned. Ten years ago, When I was a youngster of 67years I had a quadruple heart by-pass and was back at work in 3-1/2 weeks and this time I planned on a much shorter recovery. It didn't happen, lots of complications and I was on my back with my leg elevated for months.

Obviously, I had planned to take advantage of the first notice Fee of \$150, but I was never conscious that I had not already paid that Fee until I received the Second Notice a few days ago.

If there is a possibility for clemency, I would deeply appreciate it, just deposit the \$150.00 check. If it is an unfair request, you have our check for \$400.00 and I will understand.

Sincerely,

M. William Saul