

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # 215601 (6)
1. Corporation Name
14TH ST FABRIC BAZAAR INC



Principal Place of Business
1367 N MIAMI AVE MIAMI FL 33136

Mailing Address
1367 N MIAMI AVE MIAMI FL 33136

2. Principal Place of Business
21 State, Apt. #, etc.
22 City & State
23 Zip Country
24 25 29 30

2a. Mailing Address
26 Suite, Apt. #, etc.
27 City & State
28 Zip Country
29 30

3. Date Incorporated or Qualified **09/22/1958** 3a. Date of Last Report **04/17/1995**

4. FEI Number **59-0840632** Applied For Not Applicable

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

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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes. Yes No

g. Name and Address of Current Registered Agent
**SCHWARTZ, IRWIN
1367 NO. MIAMI AVENUE
MIAMI FL 33136**

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0092 and 607.1508, 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 obligations of, Sections 607, Florida Statutes.

SIGNATURE _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1. TITLE	2. NAME
PO	SCHWARTZ, IRWIN	13.1 TITLE	13.2 NAME
1367 N. MIAMI AVENUE	MIAMI FL	13.3 STREET ADDRESS	13.4 CITY - ST - ZIP
VSD	SCHWARTZ, HEATH	13.5 TITLE	13.6 NAME
1367 N. MIAMI AVENUE	MIAMI FL	13.7 STREET ADDRESS	13.8 CITY - ST - ZIP
		13.9 TITLE	13.10 NAME
		13.11 STREET ADDRESS	13.12 CITY - ST - ZIP
		13.13 TITLE	13.14 NAME
		13.15 STREET ADDRESS	13.16 CITY - ST - ZIP
		13.17 TITLE	13.18 NAME
		13.19 STREET ADDRESS	13.20 CITY - ST - ZIP
		13.21 TITLE	13.22 NAME
		13.23 STREET ADDRESS	13.24 CITY - ST - ZIP
		13.25 TITLE	13.26 NAME
		13.27 STREET ADDRESS	13.28 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this Form is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(g), Florida Statutes. I further certify that the information included 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 manager or trustee responsible to prepare 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 a separate statement with and there is

SIGNATURE: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/15/96
305-371-6684

CR2E034 (12/95)