

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JUN -1 AM 10:30

DOCUMENT # **263110** (9)

1. Corporation Name
SUBURBAN KNITTING MILLS INC

Principal Place of Business
**5805 WEST PARK RD.
HOLLYWOOD FL 33021**

Mailing Address
**5805 WEST PARK RD.
HOLLYWOOD FL 33021**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **09/27/1962** 3a. Date of Last Report **04/29/1994**

4. FEI Number **59-0979314** 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

2. Principal Place of Business 2a. Mailing Address

21 Suite, Apt. #, etc 26 Suite, Apt. #, etc

22 City & State 27 City & State

23 Zip 28 Zip 24 Country 25 Country 29 Country 30 Country

9. Name and Address of Current Registered Agent

**FREUND, BRUCE T.
5805 W.PARK ROAD
HOLLYWOOD FL 33021-3883**

10. Name and Address of New Registered Agent

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 607.0502 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 provisions of, Section 607.0506, Florida Statutes.

SIGNATURE: *B. Freund* (Signature of registered agent and if not applicable) (Date) **5/20/95**

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE **PO**

2. NAME **FREUND, ALBERT**

3. STREET ADDRESS **5740 SW 17TH ST**

4. CITY, ST, ZIP **PLANTATION FL**

1. TITLE **VD**

2. NAME **FREUND, BRUCE**

3. STREET ADDRESS **6201 SW 8TH ST.**

4. CITY, ST, ZIP **PLANTATION, FL 00000**

1. TITLE **D**

2. NAME **FREUND, MUREL**

3. STREET ADDRESS **5740 SW 17TH ST**

4. CITY, ST, ZIP **PLANTATION FL**

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY, ST, ZIP

Change Addition

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY, ST, ZIP

Change Addition

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY, ST, ZIP

Change Addition

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY, ST, ZIP

Change Addition

14. I do hereby 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 indicated on this annual report or supplemental annual reports 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 authorized to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13, changed or on an attachment with an address.

SIGNATURE: *B. Freund* SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Date) (Signature) (Print Name)