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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Saridra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

(3)

| LA BELLE FABRICS, INC.  **Incapial Place of Business**  180 NE 39 ST.  ** 109  MIAMI FL 33137  |  | Mailing Address  180 NE 39 STREET SUITE 109 MIAMI FL 33137       |   |   |   |                    |                                     |  |
|--|--|--|---|---|---|--------------------|-------------------------------------|--|
|  |  | US   |   |   | 3. Date Incorporated or Qualified 04/03/1963 3a. Date of Last Rep 02/03/1995                                  |                    |                                     |  |
| Principal Piac   | e of Business  | 2a. Mailing Address  |   |   | 4. FEI Number 59-1007613  |                    |                                     | Applied For<br>Not Applicab                            |
| Suite, Apl. #,   | etc.   | Su'te, Apt. #, etc.  |   |   | 5. Certificate of Status Desired  |                    | \$8.75                              | Additional   |
| Oity & State   |  | City & State   |   |   | 6. Election Campaign Financing  |                    |                                     | Required  May Be                                       |
| ony a state:   |  | 28   |   |   | Trust Fund Contribution   |                    | Added                               | d to Fees  |
| Zip  | Country 25   | Ζιρ<br><b>29</b>   | Country<br>30   | 1   | 8. This corporation has liability for Florida Statutes Yes  | intangible tax     | under s                             | 199.032,   |
|  | 9. Name and Address of Curre   |  |   | T :   | 10. Name and Address of New F   | tegistered A       | gent                                |  |
|  |  |  | 81  |   |   |                    |                                     |  |
| BASHA, ALBERT<br>11248 NW 3 TERR.<br>MIAMI FL 33172  |  |  | 82  | Street Addr   | ress (P.O. Box Number is Not Acceptat   | ole)               |                                     |  |
|  |  |  | 83  |   |   |                    |                                     |  |
|  |  |  | 84  | City  |   | FL                 | 85 Z                                | p Code   |
| Tacchiar with  | n, and apper regunigations of sa   | Control 607.0000, Frontia Statute  It and the it applicable.  [N | OTE Registered Age  |   | oration submits this statement for the purard of directors. I hereby accept the application when reinstalling | DATE               | ·                                   |  |
| Tan high with  | P BASHA, C. ESPER  | usha   | · o   | ev signature require  |   | DATE<br>ICERS AND  | ·                                   | ORS IN 12  |
| FI ADDRESS   | P BASHA, C. ESPER 1150 MADRUGA AVE.  | U. A. S.                     | 13. 1 1 TITLE 1 2 NAME 1 3 STREE  | eri signami e requiri   | od when reinstahiiig)   | DATE<br>ICERS AND  | DIRECTO                             | ORS IN 12  |
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celly, that I am an officer or director of the corporation or the receiver or trustee empapheers in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OFFI