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Apr 07 1997 8:00am
Secretary of State

PROFIT CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 285616 (9)
1. Corporation Name
LINDA FABRICS, INC.



Principal Place of Business
10 NW 2ND ST
10 NW 2ND ST
MIAMI FL 33128

Mailing Address
10 NW 2ND ST
10 NW 2ND ST
MIAMI FL 33128-1822

3. Date Incorporated or Qualified: 10/02/1964
3a. Date of Last Report: 03/20/1996
4. FEI Number: 59-1083041
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
21. Suite, Apt. #, etc.
22. City & State
23. Zip
24. Country
25. Country

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

9. Name and Address of Current Registered Agent
GORFINKEL, NESTOR B
7 NW 2ND STREET
SUITE 203
MIAMI FL 33128

10. Name and Address of New Registered Agent
81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City
85. Zip Code: FL

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 and, if applicable, as a family member, and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE: *Julius H. Gorfinkel*
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	PO	DELETE
NAME	GORFINKEL, JULIUS H.	
STREET ADDRESS	10 NW 2ND ST	
CITY - ST - ZIP	MIAMI, FL 0	
TITLE	VD	DELETE
NAME	SAPOZNIK, JOSE	
STREET ADDRESS	10 NW 2ND ST	
CITY - ST - ZIP	MIAMI, FL 0	
TITLE	TD	DELETE
NAME	SAPOZNIK, CLARA	
STREET ADDRESS	10 NW 2ND ST	
CITY - ST - ZIP	MIAMI, FL 0	
TITLE	SD	DELETE
NAME	GORFINKEL, LEON	
STREET ADDRESS	10 NW 2ND ST	
CITY - ST - ZIP	MIAMI FL	
TITLE	D	DELETE
NAME	SAPOZNIK, LAZARO	
STREET ADDRESS	10 NW 2ND ST	
CITY - ST - ZIP	MIAMI, FL 0	
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Change	Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY - ST - ZIP		
2.1 TITLE	Change	Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY - ST - ZIP		
3.1 TITLE	Change	Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
4.1 TITLE	Change	Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE	Change	Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE	Change	Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

14. I do 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, or in an attachment with an address.

SIGNATURE: *Julius H. Gorfinkel* 3.14.97
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)