## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 434808

(2)

PFAFF SEWING CENTER, INC

## **FILED** Apr 06 1998 8:00am Secretary of State



Principal Place of Business Mailin			ng Address					
61 W. PROSPECT ROAD 61 W. PROSPECT ROAD			CT ROAD					
FT. LAUDERDALE FL 33309		FT. LAUDERDA	FT. LAUDERDALE FL 33309			NO NOT WORK IN THE OR ARE		
						DO NOT WRITE IN THIS SE	ACE	
1						3. Date Incorporated or Qualified 09/12/1973	-	
2. Principal Pl	lace of Business	2a. Mailing Add	ress			4. FEI Number	Applied For	
21		26	<del> </del>			59-1483498	Not Applicable	
Suite, Apt. #, etc.			Suite, Apt. #, etc.				\$8.75 Additional	
22	,	27	<del> </del> -			5. Certificate of Status Desired	Fee Required	
City & State	9		City & State			6. Election Campaign Financing	<b>\$5.00</b> May Be	
23		28	28			Trust Fund Contribution	Added to Fees	
Zip	Country	Zip		Country		8. This corporation owes or has paid the curre	nt year Intangible	
24	25	29	30			Personal Property Tax due June 30.	Yes No	
	9, Name and Address of Curre	nt Registered Agent				10. Name and Address of New Registered A	gent	
BURKLE, JACK D.				81	Name			
61 W.PROSPECT RD.				82	Street	Address (P.O. Box Number is Not Acceptable)		
FT. LAUDERDALE FL 33309								
				83				
				84	City		85 Zip Code	
•				٦	City	FL	2.0000	
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 obligations of, Section 607.0505, Florida Statutes.								
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)  DATE  DATE								
12.	<del></del>	ID DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND I	DIBECTORS IN 12	
TITLE	PD			1.1 THILE			Change Addition	
NAME	BURKLE, JACK D			1.2 NAME				
STREET ADDRESS	2836 NW 11TH AVE			1.3 STREET	ADDRESS	GIDD COLONIAL DR.		
CITY-ST-ZIP	FT LAUDERDALE FL			1.4 CITY-S		G100 COLONIAL DR. MARGATE, FL 33063	}	
TOTLE	D		ELETE	2.1 TITLE			Change Addition	
NAME	CINDY D. MEAD			2.2 NAME				
STREET ADDRESS	2335 KORN ST			2.3 STREET	ADDRESS			
CITY-ST-ZIP	NILES MI			2. 4 CITY - S				
TITLE	ST			3.1 TITLE			Change Addition	
NAME	BURKLE, NORMA	_		3.2 NAME		1	-, ,	
STREET ADDRESS	2836 NW 11TH AVE			3.3 STREET	ADDRESS	GIAN COLONIAL DR.		
CITY-ST-ZIP	FT.LAUDERDALE FL			3.4. CITY - S		G100 COLONIAL DR. MARGATE, FL 33063		
TITLE	D			4.1 TITLE	, LII		Change Addition	
NAME	BURKLE, JACK D JR		1	4. 2 NAME				
STREET ADDRESS	2009 N.W. 3 AVENUE			4.3 STREET	ADDRESS			
CITY-ST-ZIP	FT LAUDERDALE FL		j	4.4 CITY - S				
TITLE				5.1 T(TLE			Change Addition	
NAME		_		5.2 NAME				
STREET ADDRESS				5.3 STREET	ADORESS			
CITY-ST-ZIP				5.4 CITY-S				
TITLE				6.1 TITLE	1 . 511		Change Addition	
NAME				6.2 NAME				
STREET ADDRESS				6.3 STREET	ADDRESS			
CITY-ST-ZIP				6.4 CITY-S				
UIT 1 - UT - ZIF				0.7 VI 1 - 9	· 411	I		

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 eath, 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 on an attachment with an address.

3/2/90

951/- 14/2 2111