

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 460013

Entity Name: M & F FABRICS INC.

FILED
Feb 26, 2007
Secretary of State

Current Principal Place of Business:

1 NORTH TAMIAMI TRAIL
OSPREY, FL 34229

New Principal Place of Business:

Current Mailing Address:

1 NORTH TAMIAMI TRAIL
OSPREY, FL 34229

New Mailing Address:

FEI Number: 59-1547953

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILLER, MARK L
4949 MYAKKA VALLEY TRAIL
SARASOTA, FL 34241 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD (X) Delete
Name: FAULMAN, JOHN G,
Address: 7043 WILD HORSE CIRCLE
City-St-Zip: SARASOTA, FL 34241

Title: SD (X) Delete
Name: FAULMAN, CATHERINE L,
Address: 7043 WILD HORSE CIRCLE
City-St-Zip: SARASOTA, FL 34241

Title: VP () Delete
Name: MILLER, MARK L
Address: 4949 MYAKKA VALLEY TRAIL
City-St-Zip: SARASOTA, FL 34241 US

Title: OFC () Delete
Name: MILLER, JENA M
Address: 4949 MYAKKA VALLEY TRAIL
City-St-Zip: SARASOTA, FL 34241 US

Title: OFC () Delete
Name: FAULMAN, JOHN N
Address: 2103 SHAWNEE ST.
City-St-Zip: SARASOTA, FL 34231

Title: OFC () Delete
Name: FAULMAN, ELIZABETH A
Address: 2103 SHAWNEE ST.
City-St-Zip: SARASOTA, FL 34231 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: OFC (X) Change () Addition
Name: FAULMAN, JOHN N
Address: 4455 DON MEYER
City-St-Zip: SARASOTA, FL 34233

Title: OFC (X) Change () Addition
Name: FAULMAN, ELIZABETH A
Address: 4455 DON MEYER
City-St-Zip: SARASOTA, FL 34233 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARK L. MILLER

VP

02/26/2007

Electronic Signature of Signing Officer or Director

Date