

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

**APPROVED
AND
FILED**

95 MAY -1 AM 3:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 526342 (1)

1. Corporation Name

UNITED KNITTING CORPORATION

Principal Place of Business

% SILVIO PEREZ JR.
1036 E. 24TH ST.
HIALEAH FL 33013

Mailing Address

% SILVIO PEREZ JR.
1036 E. 24TH ST.
HIALEAH FL 33013

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

02/22/1977

3a. Date of Last Report

04/27/1994

2. Principal Place of Business

2a. Mailing Address

21 **1036 E. 24th Street**

26 **1036 E. 24th Street**

4. FEI Number

59-1780435

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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Hialeah, FL

City & State

Hialeah, FL

Zip

33013

Country

USA

Zip

33013

Country

USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**MEYERS, STEVEN M., P.A.
ONE BISCAYNE TOWER, SUITE 3550
TWO SOUTH BISCAYNE BLVD.
MIAMI FL 33131**

81 Name

JORGE L. LOPEZ-GARCIA, ESQ.

82 Street Address (P.O. Box Number is Not Acceptable)

777 BRICKELL AVE. SUITE 950

83

84 City

Miami

FL

85 Zip Code

33131

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 607.0505, Florida Statutes.

SIGNATURE

JORGE L. LOPEZ-GARCIA, ESQ.

4-20-95

DATE

12. OFFICERS AND DIRECTORS

TITLE	PTD
NAME	PEREZ, ANTONIA
STREET ADDRESS	1036 E. 24TH STREET
CITY - ST - ZIP	HIALEAH FL
TITLE	S
NAME	PEREZ, ANTONIA
STREET ADDRESS	1036 E. 24TH STREET
CITY - ST - ZIP	HIALEAH FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	V.P.	☐ Change ☒ Addition
12 NAME	PEREZ, ANTONIA	
13 STREET ADDRESS	1036 E. 24th Street	
14 CITY - ST - ZIP	HIALEAH, FL	
21 TITLE	SEC	☐ Change ☒ Addition
22 NAME	PEREZ, ANTONIA	
23 STREET ADDRESS	1036 E. 24th Street	
24 CITY - ST - ZIP	HIALEAH, FL	
31 TITLE		☐ Change ☐ Addition
32 NAME		
33 STREET ADDRESS		
34 CITY - ST - ZIP		
41 TITLE		☐ Change ☐ Addition
42 NAME		
43 STREET ADDRESS		
44 CITY - ST - ZIP		
51 TITLE		☐ Change ☐ Addition
52 NAME		
53 STREET ADDRESS		
54 CITY - ST - ZIP		
61 TITLE		☐ Change ☐ Addition
62 NAME		
63 STREET ADDRESS		
64 CITY - ST - ZIP		

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)(k), 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 on an attachment with an address.

SIGNATURE:

Antonia Perez

ANTONIA PEREZ (DIRECTOR)

4-20-95 (305) 696-5585

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone Number