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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # 530928 (1)
1. Corporation Name
TONITA TEXTILES, INC.

Principal Place of Business: SILVIO PEREZ
1036 E. 24TH ST.
HIALEAH FL 33013-4324

Mailing Address: SILVIO PEREZ
1036 E. 24TH ST.
HIALEAH FL 33013-4324

3. Date Incorporated or Qualified: 04/06/1977
3a. Date of Last Report: 05/01/1994

4. FEI Number: 59-1715230
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

7. This corporation has liability for alternative tax under § 109.002, Florida Statutes: Yes No

2. Principal Place of Business

21. 1036 E. 24th STREET
Suite, Apt. # etc.

22. HIALEAH, FL

23. 33013
24. USA

25. USA

26. 1036 E. 24th STREET
Suite, Apt. # etc.

27. HIALEAH, FL

28. 33013
29. USA


30. USA

9. Name and Address of Current Registered Agent
STEVEN M. MEYERS, P.A.
ONE BISCAYNE TOWER, S-3550
2 S. BISCAYNE BLVD.
MIAMI FL 33131

10. Name and Address of New Registered Agent


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 607.002 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 substance of, Section 607.0505, Florida Statutes.

SIGNATURE:  JORGE L. LOPEZ-GARCIA, ESQ. 4-20-95

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
11. TITLE: PSTD	12. NAME: PEREZ, ANTONIA	11. TITLE: V.P.	12. NAME: PEREZ, ANTONIA
13. STREET ADDRESS: 1036 EAST 24TH STREET	14. CITY, ST., ZIP: HIALEAH FL 33013	13. STREET ADDRESS: 1036 E. 24TH STREET	14. CITY, ST., ZIP: HIALEAH, FL 33013
15. TITLE:	16. NAME:	15. TITLE:	16. NAME:
17. STREET ADDRESS:	18. CITY, ST., ZIP:	17. STREET ADDRESS:	18. CITY, ST., ZIP:
19. TITLE:	20. NAME:	19. TITLE:	20. NAME:
21. STREET ADDRESS:	22. CITY, ST., ZIP:	21. STREET ADDRESS:	22. CITY, ST., ZIP:
23. TITLE:	24. NAME:	23. TITLE:	24. NAME:
25. STREET ADDRESS:	26. CITY, ST., ZIP:	25. STREET ADDRESS:	26. CITY, ST., ZIP:
27. TITLE:	28. NAME:	27. TITLE:	28. NAME:
29. STREET ADDRESS:	30. CITY, ST., ZIP:	29. STREET ADDRESS:	30. CITY, ST., ZIP:
31. TITLE:	32. NAME:	31. TITLE:	32. NAME:
33. STREET ADDRESS:	34. CITY, ST., ZIP:	33. STREET ADDRESS:	34. CITY, ST., ZIP:
35. TITLE:	36. NAME:	35. TITLE:	36. NAME:
37. STREET ADDRESS:	38. CITY, ST., ZIP:	37. STREET ADDRESS:	38. CITY, ST., ZIP:

14. I do hereby certify that the information supplied with this filing was voluntarily furnished and does not equally for the exemption stated in Section 119.07(1)(b), Florida Statutes. I further certify that the information included 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 officer or director empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this filing as an attachment with an address.

SIGNATURE:  ANTONIA PEREZ/ (Director) 4-20-95 (305) 696-5585