

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 30, 2004 8:00 am
Secretary of State

07-30-2004 90005 046 ***150.00

DOCUMENT # 559552

1. Entity Name
B & C SEWING MACHINE CORP.



Principal Place of Business
**1411 BROADWAY
NEW YORK, NY 10018 US**

Mailing Address
**1411 BROADWAY
NEW YORK, NY 10018 US**

44050755



DO NOT WRITE IN THIS SPACE

07012004 No Chg-P CR2E034 (10/03)

4. FEI Number **58-1339046** Applied For
59-1339046 Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**CHESTLER, HERBERT MR.
13853 MONACO WAY
PALM BEACH GARDENS, FL 33410**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
Due by September 8, 2004**

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE **COB**
NAME **CHESTLER, HERBERT**
STREET ADDRESS **1411 BROADWAY**
CITY-ST-ZIP **NEW YORK, NY**

TITLE **P**
NAME **CHESTLER, STEVEN**
STREET ADDRESS **1411 BROADWAY**
CITY-ST-ZIP **NEW YORK, NY**

TITLE **S**
NAME **CHESTLER, RITA**
STREET ADDRESS **1411 BROADWAY**
CITY-ST-ZIP **NEW YORK, NY 10018**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
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CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JULY 26, 2004

Date Daytime Phone #