2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED **ANNUAL REPORT** Jan 31, 2008 08:00 AN **DOCUMENT #835095 Secretary of State** L & J FABRICS CO. INC. Principal Place of Business Mailing Address 2151 N. W. 93RD LANE 2151 N. W. 93RD LANE SUNRISE, FL 33322-3754 SUNRISE, FL 33322-3754 01242008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 11-2119346 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent EGYES, LESLIE DO NOT WRITE 2151 N. W. 93RD LANE SUNRISE, FL 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, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 UDDDDDD8D7504 Trust Fund Contribution. After May 1, 2008 Fee will be \$550.00 Added to Fees 02/07/08-80011-004 158.75 10. OFFICERS AND DIRECTORS PD TITLE EGYES, LESLIE NAME STREET ADDRESS 2151 N. W. 93RD LANE CITY-ST-7IP SUNRISE, FL STD TITLE EGYES, JOYCE NAME STREET ADDRESS 2151 N. W. 93RD LANE SUNRISE, FL CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

2. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 are address with all other like empowered.

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF PRINTED NAME

NAME STREET ADDRESS CITY-ST-ZIP

C-6/-J

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