FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F93000005114 (4)

WILSONS HOUSE OF SUEDE, INC.

Apr 22 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					I 1001100 (148 (DIRT 411)) 00110 EQ181 QQ11) QDFFI	ODERN BINDI NIGON PEREN ENRA NURA
7401 BOONE BROOKLYN F	AVE N PARK MN 55428	7401 BOONE AVE N BROOKLYN PARK MN 554	-			
US		US			DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified 11/12/1993	
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	Applied For
21 5a1		26 Same			95-1576546	Not Applicable
Suite, Apt.	Suite, Apt. #, etc	te, Apt. #, etc.		Certificate of Status Desired	\$8.75 Additional	
27 27						Fee Required
23		City & State	- 19g - 1		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip			Countr	y	This corporation owes or has paid the	
24	25 29 30		30		Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curr				10. Name and Address of New Registers	ed Agent
	IITED STATES CORPORATION	COMPANY	61	Name		
1201 HAYS STREET			82	Street Add	dress (P.O. Box Number is Not Acceptable)	
	ite 105 Llahassee FL 32301		83	<u> </u>		
174	DAMAGOLL I L OZOO I	•	L.			
			84],	F	85 Zip Code
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 obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE	· · · · · · · · · · · · · · · · · · ·					
12.	Stignature: hyperd or pendist name of registered a	ngestand tille if approable (NOTE: ND DIRECTORS		jent signalure requ	uired when reinstating) DATE	l
TITLE	C	DELETE	13.		ADDITIONS/CHANGES TO OFFICERS A	IND DIRECTORS IN 12
NAME	WALLED LOES AL		1.2 NAME	1		Li cliange Li Audition
STREET ADORESS	7401 POONE AVE N		•	T ADDRESS		
City-St-Zip	BROOKLYN PARK MN		14 City-			
TITLE			21 TITLE			☐ Change ☐ Addition
NAME			2 2 NAME			
STREET ADDRESS			2.3 STREE	T ADDRESS		
CITY-ST-7IP	BROOKLYN PARK MN		2 4 CITY-	ST-ZIP		
TITLE	S CARRIOUS CORRES	DELETE	3 1 THTLE			Change Addition
NAMÉ	LAPINSKY, CORRINE		3 2 NAME			
STREET ADDRESS	7401 BOONE AVE N		3.3 STREE	1 ADDRESS		
CITY - ST - ZIP			3.4. CITY -	S1 - ZIP		
TITLE	THORON DAN		4.1 TITLE			Change Addition
NAME DIVISED ADDRESS	7401 BOONE AVE N		4 2 NAME			
STREET ADDRESS	BROOKLYN PARK MN		1	T ADDRESS		
CITY-\$1-ZIP	DIOOKLIII AIK MI	DELFTE	44 CITY-1	ST-ZIP		Channe Ladding
TITLE		טענווג 🗀 ש	5 1 TITLE			☐ Change ☐ Addition
NAMÍ CTOLET ANNOLSE			5.2 NAME	Lindores		
STREET ADDRESS CITY-ST-ZIP				ADDRESS		
117LE	***************************************	DELETE	5.4 CITY-5	51-211		Change Addition
NAME		E Secret	6.2 NAME			E Originge E MONITOR
STREET ADDRESS			6.3 STREET	I ADDRESS		
CITY-SI-7IP						
	erbly that the information supplied	with this filing does not qualify for	the exemp		Section 119 07(3)(i) Florida Statutes further	cortify that the referenction

Indicated on this annual report or supplemental amount report is frue 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 frustee 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.

Tomblidenbera Chief Accounting Off. - 04/16/98