

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

FILED
Apr 09 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
---	---	--

DOCUMENT # **G77024** (9)
1. Corporation Name
BEST SEWING & VACUUM CLEANER CENTER, INC.

Principal Place of Business 8221 14 ST W 301 BRADENTON FL 34207 US	Mailing Address PO BOX 14340 BRADENTON FL 34280 US
--	--



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 1107 Cimarron Cir NW Suite, Apt. #, etc. 22 City & State 23 Bradenton Florida Zip 24 34209		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country 30 USA		3. Date Incorporated or Qualified 12/30/1983	
		4. FEI Number 59-2348579		Applied For <input type="checkbox"/> Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent ARPAIA, FRANK V., ESQUIRE 428 12TH STREET WEST BRADENTON FL 34205				10. Name and Address of New Registered Agent	
				81 Name	
				82 Street Address (P.O. Box Number is Not Acceptable)	
				83	
				84 City	
				FL 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 of 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

Signature, typed or printed name of registered agent and title if applicable.

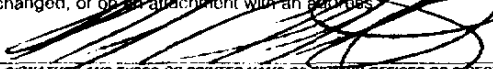
(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD CHALTIS, WILLIAM S	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1107 CIMARRON CIR NW	1.2 NAME	
STREET ADDRESS	BRADENTON, FL 00000	1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	D CHALTIS, CONNIE A.	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1107 CIMARRON CIR NW	2.2 NAME	
STREET ADDRESS	BRADENTON FL	2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	VPD DAVENPORT, ROY	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1003 CIMARRON CIR NW	3.2 NAME	
STREET ADDRESS	BRADENTON FL	3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	D DAVENPORT, WENDY	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1003 CIMARRON CIR NW	4.2 NAME	
STREET ADDRESS	BRADENTON FL	4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 addendum.

SIGNATURE:

 President 4/6/98 941-761-1618

CR2E034 (10/97)