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 # H06533

(4)

JEAN'S YARN WAREHOUSE, INC.

FILED Jan 20 1998 8:00am Secretary of State

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)		 	
Principal Place of Business Mailing Address 8541 W MCNAB ROAD C/O JEAN ISRAEL									
TAMARAC FL 33321 US		TAMARAC FL 33321-4544	5810 NW 64TH AVENUE TAMARAC FL 33321-4544			DO NOT WRITE IN THIS SPACE			
00		US			3. Date Incorporated or Qui	alified			
					06/05/1984				
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number		Ar	plied For	
21		26				ot Applicable			
Suite, Apt. #, etc.		Suite, Apt #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desi	red 🔲	7	Additional	
22		27				Fee Required			
City & State		⊢ '	City & State		' *	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
23			28		Trust Fund Contribution	<u> </u>			
Zip			<u> </u>	Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No					
24	9, Name and Address of Cu		30		10. Name and Address of N				
100		ITBILL NOGISTOIGO AGOIL	8.	1 Name	10, 114,115				
ISRAEL, JEAN 5810 N.W. 84TH AVE.									
		82	2 Street Add	fress (P.O. Box Number is Not Ad	cceptable)				
IAI	MARAC FL 33321		83	3					
				1					
			84	4 City		FL	85 Zip	Code	
44 Diverse	the provisions of Castings 607	.0502 and 607.1508, Florida Statute	ne tha abou	ve-pamed cor	poration submits this statement f		• L L	ts registered	
office or r	egistered agent or both in the S	state of Florida. Such change was a bligations of, Section 607.0505, Flo	authorized b	ov the corpora	ation's board of directors. I hereb	y accept the app	ointment as	registered	
SIGNATURE	Signature, typed or printed name of registere	ANOTE AND A STATE OF THE AND A S	E Busistered A	and country row	sired when reinstating)	DATE			
12.		AND DIRECTORS	13.	gent signature requ	ADDITIONS/CHANGES TO		D DIRECTOR	RS IN 12	
TITLE	P	DELETE	1.1 TITLE		, as a more than the second	<u> </u>	Change	Addition	
NAME	ISRAEL, JEAN		1.2 NAME						
STREET ADDRESS	Maria A. 4444 M. 4884 1. 4188			ET ADDRESS					
CITY-ST-ZIP	7414040 51		14 CITY-	i					
TITLE	***************************************	DELETE	21 TITLE				Change	Addition	
NAME			2 2 NAME						
STREET ADDRESS				ET ADDRESS					
CITY-ST-ZIP			2. 4 CITY	1					
TITLE		☐ DELETE	3.1 TITLE				Change	Addition	
NAME			3.2 NAME						
STREET ADDRESS				ET ADDRESS					
CITY-ST-ZIP			3.4. CITY						
TITLE		DELETE	4.1 TITLE		····		Change	Addition	
NAME		. —	4. 2 NAM						
STREET ADDRESS				ET ADDRESS					
CITY-ST-ZIP			4.4 CITY-	1					
TITLE		☐ DELETE	5.1 TITLE				☐ Change	Addition	
NAME			5.2 NAME	•					
STREET ADDRESS				ET ADDRESS					
- '			5.4 CITY						
CITY-ST-ZIP TITLE		DELETE	6.1 TITLE				Change	Addition	
			6.2 NAME				_		
NAME OTREET ADDRESS				ET ADDRESS					
STREET ADDRESS									
CITY-ST-ZIP			6.4 CITY-	-31-ZIF					

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 Changed, or on an attachmen with an address.

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Care

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