## 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 #

SIGNATURE:

(7)

## **FILED** Mar 11 1998 8:00am Secretary of State

03/02/98

VOGUE	E STICHING CORPORATION	1			
Principa! Plac	e of Business	Mailing Address		I NEALLIN BILL BILL BEITH MILLS BILL BILL BILL BILL BILL BILL BILL	i Bidit dinii Mihit Affit Aibit (Mā)
5101 NW 36T	'H AVENUE	5101 NW 36TH AVENUE			
MIAMI FL 33142 MIAMI FL 3314		MIAMI FL 33142	DO NOT WRITE IN THIS SPACE		
					HIS SPACE
				3. Date Incorporated or Qualified	į
2. Principal P	lace of Business	2a, Mailing Address		12/05/1986 4. FEI Number	Applied For
21	, 200 C. 200	26		59-2742569	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	·		\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	current year Intangible
24	25		30	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New Registe	red Agent
BILU, SHMUEL   61   Name					
5101 N.W. 36TH AVE. MIAMI FL 33142			82 Street Addr	ress (P.O. Box Number is Not Acceptable)	
			5.00()100		
			83		
			84 City		[05] 7:- O-4-
			84 City		FL 85 Zip Code
11. Pursuant office or r	to the provisions of Sections 607,050 egistered agent, or both, in the State m familiar with, and accept the oblid	02 and 607,1508, Florida Statute of Florida, Such change was a autions of Section 607,0505, Flo	es, the above-named corp uthorized by the corporat rida Statutes	poration submits this statement for the purpo- tion's board of directors. I hereby accept the	se of changing its registered appointment as registered
SIGNATURE					
	Signature, typed or pented name of registered ag		· Rugistered Agent signature requir		
12.		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	
TITLE	DP	☐ DELETE	1.1 TITLE		Change Addition
NAME	BILU, YEHUDA		1.2 NAME		
STREET ADDRESS	5101 NW 36TH AVENUE		1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33142		1.4 CITY - ST - ZIP		
TITLE	DS	☐ DELETE	2.1 TITLE		Change Addition
NAME	BILU, SHMUEL		2.2 NAME		
STREET ADDRESS	5101 NW 36TH AVENUE		2.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33142		2. 4 CITY-ST-ZIP		
TITLE	DV	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	LEBEDIN, SIMON		3.2 NAME		
STREET ADDRESS	5101 NW 36TH AVENUE		3.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33142		3.4. CITY-ST-ZIP		
TITLE	DV	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	SCHWARTZ, IRA		4. 2 NAME		
STREET ADDRESS	5101 N.W. 36TH AVE.		4.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33142		4.4 CITY-ST-ZIP		
TITLE	DV	☐ DELFTE	5.1 TATLE		☐ Change ☐ Addition
NAME	SCHWARTZ, STEVEN		5.2 NAME		
STREET ADDRESS	5101 NW 36 AVENUE		5.3 STREET ADDRESS		
CITY - ST - ZIP	MIAMI FL 33142		5.4 CITY - ST - ZIP		
TITLE	DV	☐ DECETE	6.1 TITLE		Change Addition
NAME	SCHWARTZ, BENNIE		6.2 NAME		
STREET ADDRESS	5101 NW 36 AVENUE		6.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33142		6.4 CHTY-ST-ZIP		
14. I hereby o	certify that the information supplied w	rith this filing does not qualify for	r the exemption stated in	Section 119.07(3)(i), Florida Statutes, I furthe	or certify that the information
officer or a Block 12 of	director of the corporation or the record Block 13 if changed, or on an at <b>ig</b>	erver or trustee empowered to e civer or trustee empowered to e chirp int with an address.	cute the report as requ	re shall have the same legal effect as if mad uired by Chapter 607, Florida Statutes; and t	hat my name appears in