FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY -1 AM 8:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **J84746** **(3)**

1. Corporation Name
CERTIFIED SEWING SERVICES, INC.

Principal Place of Business
306 10TH AVENUE, NORTH
SAFETY HARBOR FL 33570-4246

Mailing Address
306 10TH AVENUE, NORTH
SAFETY HARBOR FL 33570-4246

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **07/22/1987**

3a. Date of Last Report: **04/27/1994**

2. Principal Place of Business (21) | 2a. Mailing Address (26)

Suite, Apt. # or P.O. Box (22) | Suite, Apt. # or P.O. Box (27)

City & State (23) | City & State (28)

Zip (24) | County (25) | Zip (29) | County (30)

4. FEI Number: **59-2830481** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☑ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has failed to file/complete its report under § 607.032, Florida Statutes. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

BASKIN, HAMDEN H., III
516 N. FT. HARRISON AVE
CLEARWATER FL 34615

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 Section 607.1005 and 607.1007, 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. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12	
Title	DP	Title	☐ Change ☐ Addition
Name	HALL, GORDON E.	Name	
Street Address	19636 - GULF BLVD.	Street Address	
City-St-Zip	INDIAN ROCKS BCH FL	City-St-Zip	
Title	DST	Title	☐ Change ☐ Addition
Name	LOPATIN, JEFFREY	Name	
Street Address	2300 S. BELCHER ROAD	Street Address	
City-St-Zip	LARGO FL	City-St-Zip	
Title		Title	☐ Change ☐ Addition
Name		Name	
Street Address		Street Address	
City-St-Zip		City-St-Zip	
Title		Title	☐ Change ☐ Addition
Name		Name	
Street Address		Street Address	
City-St-Zip		City-St-Zip	
Title		Title	☐ Change ☐ Addition
Name		Name	
Street Address		Street Address	
City-St-Zip		City-St-Zip	
Title		Title	☐ Change ☐ Addition
Name		Name	
Street Address		Street Address	
City-St-Zip		City-St-Zip	

14. I hereby certify that the information supplied with this report is accurate and that such information was supplied on the corporation's behalf by its officers, directors, agents or attorneys. 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 12 or Block 13 above or on an attachment with an address.

SIGNATURE: Jeffrey A. Lopatin JEFF LOPATIN 4-13-95

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0344401 CP