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

PROFIT
CORPORATION
ANNUAL REPORT
1998



H ORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K41788

(6)

SEWING STUDIO PROPERTIES, INC.

## FILED May 13 1998 8:00am Secretary of State



861 W MORSE BLYD.#250/ WINTER PARK. FL P.O. BOX 940658 MAITLAND FL 32794-7658		861 W MORSE BLVD.#250/ WINTER PARK, FL P.O. BOX 940658 MAITLAND FL 32794-7658		DO NOT WRITE IN THIS SPACE  3. Date incorporated or Qualified  11/02/1988			
	Place of Business	2a. Mailing Address		4. FEI Number		Applied For	
21		26		59-2250985			
Suite, Apt. #, etc.		Suite, Apt #, etc.		5. Certificate of Status Desired	S8.75 Additional Fee Required		
City & Sta	te	City & State		8. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip <b>24</b>	Country 25	7ip <b>29</b>	Counti	У	This corporation owes or has pa     Personal Property Tax due Jurie		Intangible  No
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Fig.	gistered Agent	
SA	IITH, RANDALL C ESQ		8	1 Name	BERRY J. WALKER		
750 MAITLAND AVE MAITLAND FL 32751			8:	2 Street Add	set Address (P.O. Box Number is Not Acceptable) 235 S MAITLAND AVENUE		
114			8:	3			
			8		MAITLAND		Zip Code 2751
11, Pursuan office or agent. I SIGNATURE	(IV MUSTA)	//			rporation submits this statement for the pation's board of directors. I hereby acception between the patients of the patients	ourpose of changing the appointment 4/98	ng its registered as registered
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECT	TORS IN 12
TITLE	PO	DELETE	11 TITLE			Chan	ge Addition
NAME	MOGUL, RUTH N.		1.2 NAME				İ
STREET ADDRESS	661 W MORSE BLVD.		1.3 STRE	ET ADDRESS			
CITY-ST-ZIP	WINTER PARK FL		14 CiTY			Chan	an Addition
TITLE		DELETE	2 1 THTLE	i		L.] Chan	ge L Addition
NAME			2.2 NAME				
STREET ADDRESS			2.3 STHE	ET ADDRESS			
CITY-ST-ZIP TITLE		DELETE	3.1 TITLE			Chan	ge Addition
NAME			3.2 NAMI	1			
STREET ADDRESS			3.3 STRE	FT ADDRESS			
CITY-ST-ZIP			3.4. CITY	- ST - ZIP			
TITLE		☐ DELETE	4.1 TITLE			☐ Chan	ge 🔲 Addition
NAME			4. 2 NAM	E			
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP		DELETE	4.4 CITY			☐ Chan	ge Addition
TITLE		רו הנרניון	5.1 TITLE			FI CIMII	Ac T Vandelous
NAME OTOETT ADODECC			5.2 NAM1				
STREET ADDRESS			5.3 STRE 5.4 CITY	ET ADDRESS			
CITY-ST-ZIP TITLE	<del> </del>	☐ DELETE	6.1 TITLE			☐ Chan	ge Addition
NAME			6.2 NAMI			-	
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP			6.4 CITY				

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 address.