FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



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

1996
DOCUMENT #
1. Corporation Name

M13341

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(6)

EDWARD'S DRAPERY SERVICE, INC.

		· · · · · · · · · · · · · · · · · · ·				
Principal Pia	ace of Business	Mailing Address			A MANAGAM CAN MARK CHANG MICH GIRES MAN DIS	ir mimir Ark it Aldis Mibit Millit 1881
C/O EDWARD J. SMITH 240 E. TROPICAL WAY PLANTATION FL 33317		C/O EOWARD J. SM 240 E. TROPICAL W/ PLANTATION FL 333	AY		Date Incorporated or Qualified 3a.	Date of Last Report
					03/29/1985	03/23/1995
1.1	Place of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26			59-2526452	Not Applicable
22 S.III.G. AF	ot. #, etc.	Suite, Apt. #, etc			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City 8 St	tate	City & State			6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Ziji na l	Country	Zp	Cou	ntry	8. This corporation has liability for intangits	•
24	25 9. Name and Address of Curre	29 ent Registered Agent	30		Florida Statutes Yes No.	
		The Fregueta Agent		81 Name	IU. Itamie and Address of New Register	au Agent
SMIT	TH, EDWARD J.					
	E. TROPICAL WAY			82 Street Add	dress (P.O. Box Number is Not Acceptable)	
PLAN	ITATION FL 33317			83	444	
				84 City		85 Zip Code
				- '	F	-L
 Pursuar or regis 	nt to the provisions of Sections 607.050 stered agent, or both, in the State of Flo	02 and 607.1508, Florida Statu orida, Sucti change was authori	ites, the abo	ve named corpo	pration submits this statement for the purpose of ard of directors. I hereby accept the appointmen	changing its registered office
familiar	with, and accept the obligations of, Se	ction 607.0505, Florida Statute	is.	or portainors a box	no or all octors. Thoroby accept the appointment	t as registered agent. I am
SIGNATURE						
12.	Stjusture typed or printed name of register, day	ent and title in applicability (N ND DIRECTORS		Agent signature require		
Tille	P	DELETE	13.	NT F	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change Addition
NAME	SMITH, EDWARD J.		12 N	1		C criaritie C Modition
STHEET ADDRES	A46 FACT TOODIO II WAY		ľ	REET ADDRESS		
00 V - S1 ZIP	PLANTATION FL			TY-S1-ZIP		
101F	ST	□ DELETE	2 1 1			Change Addition
NAME	SMITH, BERNICE J.	_	22 N	AME		
STREET ADDRES	AM PART TRADUCAL WAY			REET ADDRESS		
CHTY - ST - ZIP	PLANTATION FL			TY-\$1-ZIP		
101; F		DELFTE	3 1 1			Change Addition
NAME			3 2 N	AME		
STEEL LADDRES	SS		33 \$	TREET ADDRESS		
CHY-ST 749			340	TY-ST-ZIP		
T.ILE	:	DELETE	4 1 1	!!LE		Change Addition
NAME			4.2 No	AME		
STREET ADDRESS	95		435	HEET ADDRESS		
CHY-\$1-ZIF				TY - ST - ZIP		
TIPLE		DELETE	5 1 1			☐ Change ☐ Addition
NAME			52 N			
STREET ADDRES	25			REFT ADDRESS		
Cilly ST-ZiP		☐ DELETE		TY-ST-ZIP		Channa C Addition
TIT_F *IS\$80			6 1 T			Change Addition
NAMI CHECK ARROSE	ec l		6.2 N			
STREET ADORES	20		1	REE 1 ADDRESS		
0111 S1-21F 14. I do ha:	eby certify that the information supplier	d with this fring is voluntarily for	mished and	TY-S1-ZIP does not qualify	for the exemption stated in Section 119.07(3)(k)	Florida Statutes I turthor
certify t oatri, th	that the information indicated on this an	inual report or supplemental an poration or the receiver or trust	nual report i ee empowe	s true and accur	rate and that my signature shall have the same leads report as required by Chapter 607, Florida St	ogal offact as if made under

954-584-1629