SIGNATURE:X

2008 FOR PROFIT CORPORATION **ANNUAL REPORT**

Jan 22, 2008 08:00 AN Secretary of State DOCUMENT # P01000078750 1. Entity Name BERNINA PFAFF SEWING CENTER, INC. Principal Place of Business Mailing Address 14976 N FLORIDA AVE. 14976 N FLORIDA AVE. **TAMPA, FL 33613** TAMPA, FL 33613 01152008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3740875 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SIDLER, GREGOR DO NOT WRITE 28815 WINDOVER STREET WESLEY CHAPEL, FL 33544 IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2008 Fee will be \$550.00 Added to Fees 10. TITLE NAME SIDLER; GREGOR STREET ADDRESS 28815 WINDOVER STREET CITY-ST-ZIP WESLEY CHAPEL, FL 33544 U000Q07<u>9</u>Q<u>5</u>71 TITLE SIDLER, DEBRA NAME STREET ADDRESS 28815 WINDOVER STREET CITY-ST-ZIP WESLEY CHAPEL, FL 33544 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME -STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes. 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 10 or Block 11 if changed, or on an attachment with an address, with all other than the information contained in Chapter 119. Florida Statutes. 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 10 or Block 11 if changed, or on an attachment with an address, with all other than the corporation of the corporation or the receiver or trustee empowered.

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