2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000004852 MAR - LEN EMBROIDER & DESIGN, INC.



Principal Place of Business

7725 W 26TH AVE

BAY #3

HIALEAH, FL 33016 US

Mailing Address

7725 W 26TH AVE

BAY #3

HIALEAH, FL 33016

FILED Mar 13, 2007 8:00 am Secretary of State

03-13-2007 90018 015 ***150.00

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04-3587298



Not Applicable

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\$8.75 Additional 5. Certificate of Status Desired Fee Required

6. Name and Address of Current Registered Agent

VENERO, HELEN 14840 DADE PINE AVE. MIAMI LAKES, FL 33014

DO NOT WRITE 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) DATE					
FILE NOWIII FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Added to Fees					
10.	OFFICERS AND DIREC	CTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD GALAN, MARIA ELOINA 8851 1333 WEST 49 PLACE #302 # 67 HIALEAH, FL 33012 # 67	NW 11974 St 12 Cardons FL33018			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD VENERO, HELEN 14840 DADE PINE AVE. MIAMI LAKES, FL 33014				
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		•			NOT WRITE THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE 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 like empowered.					

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR