

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000007318

Entity Name: S & S TEXTILES, INC.

FILED
Apr 28, 2005
Secretary of State

Current Principal Place of Business:

9720 NW 91ST CT
MEDLY, FL 33178

New Principal Place of Business:

1055 W. 29 STREET, SUITE 1 2ND FLOOR
HIALEAH, FL 33012

Current Mailing Address:

1055 W. 29 STREET, SUITE 1 2ND FLOOR
HIALEAH, FL 33012

New Mailing Address:

FEI Number: 80-0033118 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DONATES, P.C.
3921 SW 8 STREET, SUITE 206
MIAMI, FL 33134 US

Name and Address of New Registered Agent:

DONATES, P.C.
3971 SW 8 STREET, SUITE 206
MIAMI, FL 33134 US

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.

SIGNATURE:

04/28/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DONATES, P.C.
Address: 3921 SW 8 STREET, SUITE 206
City-St-Zip: MIAMI, FL 33134

Title: D () Delete
Name: RHAMMER, DANIEL
Address: 1933 PEMBROKE RD.
City-St-Zip: HOLLYWOOD, FL 33020

Title: D () Delete
Name: MUKHERJEE, SONY
Address: 17300 N.W. 68TH AVE 319
City-St-Zip: HIALEAH, FL 33015

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: DONATES, P.C.
Address: 3971 SW 8 STREET, SUITE 206
City-St-Zip: MIAMI, FL 33134

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: P.C. DONATES

PD

04/28/2005

Electronic Signature of Signing Officer or Director

Date