

**2006 FOR PROFIT CORPORATION REINSTATEMENT**

**FILED  
Oct 19, 2006  
Secretary of State**

DOCUMENT# P05000080623

Entity Name: EMBROIDERY STATION INC.

**Current Principal Place of Business:**

P.O. BOX 11740  
PENSACOLA, FL 32534

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 11740  
PENSACOLA, FL 32534

**New Mailing Address:**

FEI Number: 20-2971025      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BUSINESS FILINGS INCORPORATED  
1203 GOVERNORS SQUARE BLVD., STE. 101  
TALLAHASSEE, FL 323012960 US

**Name and Address of New Registered Agent:**

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: HAILE BEKELE

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  
Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DVT ( ) Delete  
Name: ALKIS, ERAY  
Address: 2136 AINSDALE CT.  
City-St-Zip: NAVARRE, FL 32566

Title: P ( ) Delete  
Name: BEKELE, HAILE  
Address: 1501 NEWCASTLE WAY  
City-St-Zip: PENSACOLA, FL 32534

Title: S ( ) Delete  
Name: BEKELE, FEKADE  
Address: 1501 NEWCASTLE WAY  
City-St-Zip: PENSACOLA, FL 32534

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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 Chapter 119, 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: HAILE BEKELE

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

MR

10/19/2006

\_\_\_\_\_  
Date