
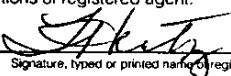



2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 26, 2007 8:00 am
Secretary of State

02-26-2007 90063 018 ***150.00

DOCUMENT # P06000069069 1. Entity Name SEWING CENTER INC.																													
Principal Place of Business 6602 NW 57TH CT. TAMARAC, FL 33321			Mailing Address 6602 NW 57TH CT. TAMARAC, FL 33321																										
2. Principal Place of Business - No P.O. Box # 1951 N. FEDERAL HWY		3. Mailing Address Suite, Apt. #, etc.																											
City & State BOCA RATON		City & State FL		4. FEI Number 11-3781796																									
Zip 33432		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required																									
6. Name and Address of Current Registered Agent HERTZ, LIDDY 6602 NW 57TH CT. TAMARAC, FL 33321				7. Name and Address of New Registered Agent Name Liddy Hertz Street Address (P.O. Box Number is Not Acceptable) 1951 N. FEDERAL HWY. City BOCA RATON FL Zip Code 33432																									
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  DATE 2/12/7 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>																													
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																										
<div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> 10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 45%;">PSD</td> <td style="width: 40%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>HERTZ, LIDDY</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>1951 N. FEDERAL HWY.</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>BOCA RATON, FL 33432</td> <td></td> </tr> </table> </div> <div style="width: 48%;"> 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 45%;"></td> <td style="width: 40%; text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table> </div> </div>						TITLE	PSD	<input type="checkbox"/> Delete	NAME	HERTZ, LIDDY		STREET ADDRESS	1951 N. FEDERAL HWY.		CITY-ST-ZIP	BOCA RATON, FL 33432		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS			CITY-ST-ZIP		
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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.																													
SIGNATURE:  Liddy Hertz 2/12/7 561 368-8082 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>																													