

# **2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P06000071770

Entity Name: J&J TWINS EMBROIDERY INC

**FILED**  
**Mar 05, 2007**  
**Secretary of State**

**Current Principal Place of Business:**

15011 ROCKY LEDGE DR  
TAMPA, FL 33625 US

**New Principal Place of Business:**

**Current Mailing Address:**

15011 ROCKY LEDGE DR  
TAMPA, FL 33625 US

**New Mailing Address:**

FEI Number: 20-4949862

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ANDREWS, ADELA  
15011 ROCKY LEDGE DR  
TAMPA, FL 33625 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PST ( ) Delete  
Name: ANDREWS, ADELA  
Address: 15011 ROCKY LEDGE DR  
City-St-Zip: TAMPA, FL 33625 US

Title: VP ( ) Delete  
Name: RUBIANO, LUZ D  
Address: 8512 SUNBEAM LN  
City-St-Zip: TAMPA, FL 33615 US

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

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

Title: VP (X) Change ( ) Addition  
Name: LOPEZ, LUX  
Address: 15011 ROCKY LEDGE DR  
City-St-Zip: TAMPA, FL 33625 US

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: ADELA ANDREWS

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03/05/2007

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

\_\_\_\_\_  
Date