

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000075785

Entity Name: STITCH FX, INC.

FILED
Apr 25, 2008
Secretary of State

Current Principal Place of Business:

176B EGLIN PARKWAY NE
FORT WALTON BEACH, FL 32548

New Principal Place of Business:

176 EGLIN PARKWAY NE
B
FORT WALTON BEACH, FL 32548

Current Mailing Address:

P O BOX 1083
FORT WALTON BEACH, FL 32549

New Mailing Address:

FEI Number: 20-4963088

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAPALLIA, SHAWN A
176B EGLIN PARKWAY NE
FORT WALTON BEACH, FL 32548 US

Name and Address of New Registered Agent:

CAPALLIA, SHAWN A
176 EGLIN PARKWAY NE
B
FORT WALTON BEACH, FL 32548 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:

04/25/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CAPALLIA, SHAWN A
Address: 176B EGLIN PARKWAY NE
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: TREA () Delete
Name: CAPALLIA, NILUBOL
Address: 176B EGLIN PARKWAY NE
City-St-Zip: FORT WALTON BEACH, FL 32548

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CAPALLIA, SHAWN A
Address: 176-B EGLIN PARKWAY NE
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: TREA (X) Change () Addition
Name: CAPALLIA, NILUBOL
Address: 176-B EGLIN PARKWAY NE
City-St-Zip: FORT WALTON BEACH, FL 32548

I hereby certify that the information supplied with this filing does not qualify 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: NILUBOL CAPALLIA

TREA

04/25/2008

Electronic Signature of Signing Officer or Director

Date