

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000110790

Entity Name: STITCHING GONE WILD, INC.

**FILED**  
**Apr 29, 2011**  
**Secretary of State**

## **Current Principal Place of Business:**

21201 HIGHLAND LAKES BLVD.  
MIAMI, FL 33179 US

## **New Principal Place of Business:**

1815 NE 197 TERR  
MIAMI, FL 33179 US

## **Current Mailing Address:**

21201 HIGHLAND LAKES BLVD.  
MIAMI, FL 33179 US

## **New Mailing Address:**

1815 NE 197 TERR  
MIAMI, FL 33179 US

FEI Number: 26-1201727

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ARECHABALETA, PATRICIA CPA  
4000 HOLLYWOOD BLVD.  
215-S  
HOLLYWOOD, FL 33021 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: P  
Name: GOODMAN, DAWN  
Address: 1815 NE 197 TERRACE  
City-St-Zip: MIAMI, FL 33179 US

I hereby 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 all other like empowered.

SIGNATURE: DAWN GOODMAN

P

04/29/2011

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

\_\_\_\_\_  
Date