

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 JAN 17 PM 1:15

DOCUMENT # P37192 (2)

1. Corporation Name

VALLEY FORGE FABRICS, INC.

Principal Place of Business

Mailing Address

**6881 N.W. 16TH TERRACE
FT. LAUDERDALE FL 33309**

**6881 N.W. 16TH TERRACE
FT. LAUDERDALE FL 33309**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/23/1992

3a. Date of Last Report

01/21/1994

4. FEI Number

13-2895229

Applied For

Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐ **\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under S. 196 (32),
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**DOBIN, JUDY
6881 N.W. 16TH TERRACE
FT. LAUDERDALE FL 33309**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0503 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

Signature of person in the position of registered agent or officer of corporation

Signature of person in the position of registered agent or officer of corporation

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
PCD
NAME
DOBIN, DAN
STREET ADDRESS
6881 N.W. 16TH TERRACE
CITY, ST, ZIP
FT. LAUDERDALE FL

TITLE
VD
NAME
DOBIN, JUDY
STREET ADDRESS
6881 N.W. 16TH TERRACE
CITY, ST, ZIP
FT. LAUDERDALE FL

TITLE
STD
NAME
LIBERMAN, MICHAEL
STREET ADDRESS
935 NORTHERN BLVD.
CITY, ST, ZIP
GREAT NECK NY

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

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CITY, ST, ZIP

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STREET ADDRESS
CITY, ST, ZIP

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

14 FILE ☐ Change ☐ Addition

15 NAME

16 STREET ADDRESS

17 CITY, ST, ZIP

21 FILE ☐ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY, ST, ZIP

25 FILE ☐ Change ☐ Addition

26 NAME

27 STREET ADDRESS

28 CITY, ST, ZIP

29 FILE ☐ Change ☐ Addition

30 NAME

31 STREET ADDRESS

32 CITY, ST, ZIP

33 FILE ☐ Change ☐ Addition

34 NAME

35 STREET ADDRESS

36 CITY, ST, ZIP

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 190.01(2)(b), Florida Statutes. I further certify that the information is filed in the annual report or supplemental annual report is true and accurate and that the signature shall have the same legal effect as if made under oath. That a change of address for the corporation, the removal of the person empowered to execute this report as required by Chapter 947, Florida Statutes, and that my name appears in Block 12 or Block 13 is changed, in order to conform with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF CURRENT OFFICER OR DIRECTOR

Judy Dobin

1/10/95

(305)971-1776