FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 24 PM 3:50

DOCUMENT # **P93000076709 (3)**

1. Corporation Name
TEXTILES R US, INC.

Principal Place of Business	Mailing Address
2239 NW 20 ST MIAMI FL 33142	2239 NW 20 ST MIAMI FL 33142

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified	3a. Date of Last Report
11/05/1993	10/05/1994

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc 22	Suite, Apt. #, etc 27
City & State 23	City & State 28
Zip / Country 24 / 25	Zip / Country 29 / 30

4. FEI Number
65-0340412
[ ] 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. Has corporation has liability for intangible tax under Ch. 199 F.S. Florida Statutes [ ] Yes [ ] No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
RANGEL, ANDY D 2239 NW 20TH ST MIAMI FL 33142	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 607.0502 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

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND/OR DIRECTORS
TITLE	P	[ ] Change [ ] Addition
NAME	DIAZ, CARLOS A	
STREET ADDRESS	2239 NW 20 ST	
CITY ST ZIP	MIAMI FL 33142	
TITLE	ST	[ ] Change [ ] Addition
NAME	RANGEL, ANDY D	
STREET ADDRESS	2239 NW 20 ST	
CITY ST ZIP	MIAMI FL 33142	
TITLE		[ ] Change [ ] Addition
NAME		
STREET ADDRESS		
CITY ST ZIP		
TITLE		[ ] Change [ ] Addition
NAME		
STREET ADDRESS		
CITY ST ZIP		
TITLE		[ ] Change [ ] Addition
NAME		
STREET ADDRESS		
CITY ST ZIP		
TITLE		[ ] Change [ ] Addition
NAME		
STREET ADDRESS		
CITY ST ZIP		

14. I do hereby certify that the information supplied with this filing is validly furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 above, or on an attachment with an address.

SIGNATURE: Andy Rangel ANDY RANGEL
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0193048 CP