FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P94000074849

1. Corporation Name

508 S.E. 15TH AVENUE

BOYNTON BEACH FL 33435

FRAN'S SEW N SEW, INC.

Principal Place of Business

Mailing Address

508 S.E. 15TH AVENUE **BOYNTON BEACH FL 33435**

FILED Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90050 005 ***150.00



DO NOT WRITE IN THIS SPACE

							3. Date Incorporated or Qualifed		
							10/10/1994		
2. Principal Place of Business			2a. Mailing Address				4. FEI Number Applied For		
21			26				65-0537106 Not Applicable		
Suite, Apt. #, etc.			Suite, Apt. #, etc.				· _ \$8.75 Additional		
22			27 City & State				5. Certificate of Status Desired Fee Required		
City & Stat	e	<u> </u>	ty & State				6, Election Campaign Financing \$5.00 May Be		
23		28					Trust Fund Contribution Added to Fees		
Zip	Country Zip			—	Country		8. This corporation owes the current year Intangible		
24 25 29				30			Personal Property Tax.		
	9. Name and Address of Current	Register	ed Agent		_		10, Name and Address of New Registered Agent		
DELL E COLUCEA					81 Name				
BELL, E. FRANCES					32 Street Address (P.O. Box Number is Not Acceptable)				
508 S.E. 15TH AVENUE					Street Address (F.O. Box Multiper is Not Acceptable)				
BOY	NTON BEACH FL 33435			Je	33	3			
				L	\downarrow				
					34	City	FL ⁸⁵ Zip Code		
		1 607	4500 FL 34- 00-1-1-	- 16	Щ.				
11. Pursuant office or r	to the provisions of Sections 607.0502 edistered agent, or both, in the State o	and 607. If Florida.	1508, Fiorida Statute: Such change was auf	s, the abo thorized i	ove. ov ti	-named corp he corporation	rporation submits this statement for the purpose of changing its registered tion's board of directors. I hereby accept the appointment as registered		
agent. I a	m familiar with, and accept the obligati	ions of, Se	ection 607.0505, Flori	da Statut	es.		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
SIGNATURE									
	Signature, typed or printed name of registered agent	and title if ap	olicable. (NOTE: F	Registered A	gent	signature require	ired when reinstating) DATE		
12.	OFFICERS AND	DIRECT		_13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D E		☐ DELETE	1.1 TML	E	1	☐ Change ☐ Addition		
NAME	Bell, E. Francís			1.2 NAM	E				
STREET ADDRESS	508 S.E. 15TH AVENUE			1.3 STR.	EET/	ADDRESS .			
CITY-ST-ZIP	BOYNTON BEACH FL 33435			1.4 CITY	-ST-	- 7iP			
TITLE			DELETE	2.1 TITL			☐ Change ☐ Addition		
NAME			—	2.2 NAM		ı	- -		
1				4	-				
STREET ADDRESS						ADDRESS			
CITY-ST-ZIP				2.4 CIT		-ZIP	Chance Cladition		
TITLE"	,		· DELETE * *	3.1 TTTL	Ę	_	Change Addition		
NAME				3.2 NAM	E	}			
STREET ADDRESS				3.3 STR	EET/	ADDRESS			
CITY-ST-ZIP				3.4. CIT	-ST	-ZIP			
TITLE			☐ DELETE	4.1 TITL	E		☐ Change ☐ Addition		
NAME :				4. 2 NAA	Æ				
STREET ADDRESS						ADDRESS			
i				4.4 CITY					
TITLE			☐ DELETE	5.1 TITL		<u></u>	☐ Change ☐ Addition		
ſ				5.2 NAM					
NAME				1	_	ADDRESS	·		
STREET ADDRESS				1					
CITY-ST-ZIP				5.4 CITY		- 41	FT AL		
TITLE			☐ DELETE	6.1 TITL		-	☐ Change ☐ Addition		
NAME				6.2 NAM	E	}			
STREET ADDRESS				6.3 STR	EET/	ADDRESS			
CITY-ST-ZIP				6.4 CTTY	-51-	-21P			
	- r.E. 11 - 1 12 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	this filles	deed not evolify for I	ho ovom	41-0	n stated in S	Section 119 07(3)(i) Florida Statutes I further certify that the information		

indicated on this annual report or supplied with an address, in the exemption stated in Section 179.07(5), Florida Statutes. Indirect certay that the mindicated on this annual report is 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 if changed, or on an attachment with an address, with all other like empowered.

CR2E034 (11/98)