


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007 08:00 AM
Secretary of State

DOCUMENT # P94000093254	
1. Entity Name FABRIC GALLERY, INC.	

Principal Place of Business 4712 S.W. 72ND AVE MIAMI, FL 33155 US	Mailing Address 4712 S.W. 72ND AVE MIAMI, FL 33155 US
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DO NOT WRITE IN THIS SPACE



04192007 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0552813	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent GATTAS, JORGE E 7621 SW 149 STREET MIAMI, FL 33158

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____
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FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD BATULE, JOSE A 14911 SW 75TH CT. MIAMI, FL 33158
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD GATTAS, JORGE E 7621 SW 149TH ST MIAMI, FL 33158
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BATULE, VIVIAN 14911 SW 75TH CT. MIAMI, FL 33158
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S GATTAS, CAROLINA 7621 SW 149 ST. MIAMI, FL 33158
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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05/18/07-80017-024 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: <u>Jose Batule</u> JOSE BATULE, PRES. <u>4/23/07</u> <u>305-6692999</u>	Date	Daytime Phone #
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		