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

PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

**FILED** 

Jan 27 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P9500001892 (5)

DAVENPORT FABRICS, INC.

Principal Place of Business Mailing Address 9361 S.W. 69TH STREET 9361 S.W. 69TH STREET MIAMI FL 33173-2380 MIAMI FL 33173 3a. Date of Last Report 3. Date Incorporated or Qualified 01/09/1995 05/29/1996 4. FEI Number 2, Principal Place of Business 2a. Mailing Address Applied For 65-0546545 Not Applicable 26 Suite, Apt. #, etc. Suite Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees Trust Fund Contribution 23 28 Country Country Ζip Zιο 8. This corporation has liability for intangible tax under s. 199.032, Yes No 25 Florida Statutes 29 30 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name BARCELO, CARINA 9361 S.W. 69TH STREET Street Address (P.O. Box Number is Not Acceptable) 82 **MIAM! FL 33173** 83 84 City 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. Lem familiar with, and accept the obligations of, Section 607,0505, Provide Statutes. Signating, type diperpenied mane of registered agent and the if applicable (NOTE Registered Agent signature required w (96/6)OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13, DELETE .... Change 1.1 TITLE TITLE BARCELO, HUMBERTO 1.2 NAME CR2E034 NAME 9361 S.W. 69TH STREET 1.3 STREET ADDRESS STREET ADDRESS **MIAMI FL 33173** 1.4 CITY - ST- ZIP CITY - ST - ZIP SVD Addition DELETE Change TOTALE 2.1 TITLE BARCELO, CARINA 22 NAME MALIF 9361 S.W. 69TH STREET 2.3 STREET ADDRESS STREET ADDRESS **MIAMI FL 33173** 2 4 CITY-ST-ZIP CITY-S1-ZIF DELETE ☐ Change Addition 31 TITLE HILE FERNANDEZ, LAZARO H 3.2 NAME 9361 S.W. 69TH STREET STREET ADDRESS 3.3 STREET ADDRESS MIAM! FL 33173 34. CITY - ST - ZIP CITY - ST - ZP DELETE Change ... Addition 41 TITLE TILLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ACIDRESS 4.4 CITY - ST - ZIP CITY - S1 - 7(P DELETE ☐ Change Addition TITLE 5.1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST- ZIP CHY-SI-Z0 Addition DELETE Change 61 TITLE TILLE 6.2 NAME NAM? 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY - \$1 - ZIP 14. I do hereby certify that the information supplied with this filing does not quality 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 in changed, or on an attachment with an address.