

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000008900 (9)

1. Corporation Name

FLORIDA EMBROIDERED PATCH AND EMBLEM, INC.



Principal Place of Business

Mailing Address

3950 RCA BLVD. STE. 5007
PALM BEACH GARDENS FL 33410

3950 RCA BLVD. STE. 5007
PALM BEACH GARDENS FL 33410

2. Principal Place of Business

2a. Mailing Address

21 3931 RCA Blvd.

26 3931 RCA Blvd.

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

23 3116

27 3116

24 City & State

28 City & State

25 33410

29 33410

26 USA

30 USA

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

01/30/1995

3a. Date of Last Report

05/01/1995

4. FEI Number

65-0561793

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. 199.032,
Florida Statutes

Yes No

10. Name and Address of New Registered Agent

81 Name

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

3931 RCA Blvd.
Suite # 3116

84 Palm Beach Gardens

FL

85 Zip Code

33410

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

5. (a) If typed, type name of registered agent as it appears on the filing.

(b) If typed, type name of registered agent as it appears on the filing.

(c) If typed, type name of registered agent as it appears on the filing.

12. OFFICERS AND DIRECTORS

TITLE D
NAME SHORT, DONALD W
STREET ADDRESS 3950 RCA BLVD. STE. 5007
CITY-ST-ZIP PALM BEACH GARDENS FL 33410

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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NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
3931 RCA Blvd. Ste. 3116
Palm Beach Gardens, FL 33410

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/7/96

561-627-8988

CR2E034 (3/96)