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

PROFIT CORPORATION ANNUAL REPORT

1998

SARA\$OTA FL 34233



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000023114 (8)

SARASOTA EMBROIDERY AND DESIGN, INC.

Principal Place of Business	Mailing Address		
4447 MEADOW CREEK CIR SARASOTA FL 34233	4447 MEADOW CREEK CIR SARASOTA FL 34233		
2. Principal Place of Business	2a. Mailing Address		
11	26		

65-0581407 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 27 Fee Required 22 City & State City & 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 or has paid the current year Intangible X Yes 24 29 Personal Property Tax due June 30. 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name EISS, ELIZABETH M. 4447 MEADOW CREEK CIRCLE Street Address (P.O. Box Number is Not Acceptable)

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

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age nt. I a	m lamiliar with, and accept the obligations of	of, Section 607. 0 505, Fi	orida Statutes	and the second of the second o	•
SIGNATURE	Signature, typed or printed name of registered agent and till	il applicable. (NOI	E: Registered Agent signature requi	red when reinstating) DATE	
12,	OFFICERS AND DIRE	CTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	S IN 12
TITLE	P	DELETE	1.1 TITLE	☐ Change	Addition
NAME	EISS, ELIZABETH M		1.2 NAME		
STREET ADDRESS	4447 MEADOW CREEK CIR		1.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL 34233		1.4 CITY-ST-ZIP		
TITLE		DELETE	2.1 TITLE	Change	Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2. 4 CITY-ST-ZIP		
TITLE		DELETE	3.1 TITLE	☐ Change	Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY - ST - ZIP		
TITLE		DELETE	4.1 TITLE	☐ Change	Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4 4 CITY-SY-ZIP		
TITLE		DELETE	5.1 TITLE	Change	Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE	☐ Change	Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY_ST_ZIP			6 A CITY - ST. 7ID		

14. I hereby certify that the information supplied with this filing 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 if changed, or on an attachment with an address.

941-925-4029

FILED

May 12 1998 8:00am

Secretary of State

DO NOT WRITE IN THIS SPACE

Applied For

Zip Code

3. Date Incorporated or Qualified

<u>03/22/199</u>5 4. FEI Number