


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

FILED  
Apr 29, 1999 8:00 am  
Secretary of State

04-29-1999 90117 042 \*\*\*150.00

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PROFIT CORPORATION ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS																																																	
<b>DOCUMENT # P95000030491</b>																																																			
1. Corporation Name <b>CONSOLIDATED THREAD CORPORATION</b>																																																			
Principal Place of Business <b>4990 SW 52 STREET #202 DAVIE FL 33314</b>		Mailing Address <b>4990 SW 52 STREET #202 DAVIE FL 33314</b>																																																	
2. Principal Place of Business <b>21</b>		2a. Mailing Address <b>26</b>																																																	
Suite, Apt. #, etc. <b>22</b>		Suite, Apt. #, etc. <b>27</b>																																																	
City & State <b>23</b>		City & State <b>28</b>																																																	
Zip <b>24</b>		Zip <b>29</b>																																																	
Country <b>25</b>		Country <b>30</b>																																																	
9. Name and Address of Current Registered Agent <b>BALASCO, JOHN V 2841 NE 32 ST #27 FT. LAUDERDALE FL 33306</b>																																																			
10. Name and Address of New Registered Agent <b>81 Name SAME - ADDRESS CHANGE ONLY</b> <b>82 Street Address (P.O. Box Number is Not Acceptable) 241 NE 38 ST</b> <b>83 # A-101</b> <b>84 City FT LAUDERDALE FL</b> <b>85 Zip Code 33334</b>																																																			
11. Pursuant to the provisions of Sections 607.0501 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: <u>John V. Balasco</u> DATE: <u>4-21-99</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>																																																			
12. OFFICERS AND DIRECTORS <table border="1"><thead><tr><th>TITLE</th><th>NAME</th><th>STREET ADDRESS</th><th>CITY-ST-ZIP</th><th>DELETE</th></tr></thead><tbody><tr><td>P</td><td>BALASCO, JOHN V</td><td>2841 NE 32 ST #27</td><td>FT LAUDERDALE FL 33306</td><td><input type="checkbox"/></td></tr><tr><td>VP</td><td>BARCZ, JEAN</td><td>10541 NW 10 ST</td><td>PLANTATION FL 33322</td><td><input type="checkbox"/></td></tr><tr><td></td><td></td><td></td><td></td><td><input type="checkbox"/></td></tr><tr><td></td><td></td><td></td><td></td><td><input type="checkbox"/></td></tr><tr><td></td><td></td><td></td><td></td><td><input type="checkbox"/></td></tr><tr><td></td><td></td><td></td><td></td><td><input type="checkbox"/></td></tr><tr><td></td><td></td><td></td><td></td><td><input type="checkbox"/></td></tr></tbody></table>				TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE	P	BALASCO, JOHN V	2841 NE 32 ST #27	FT LAUDERDALE FL 33306	<input type="checkbox"/>	VP	BARCZ, JEAN	10541 NW 10 ST	PLANTATION FL 33322	<input type="checkbox"/>					<input type="checkbox"/>					<input type="checkbox"/>					<input type="checkbox"/>					<input type="checkbox"/>					<input type="checkbox"/>								
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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 <table border="1"><thead><tr><th>1.1 TITLE</th><th>1.2 NAME</th><th>1.3 STREET ADDRESS</th><th>1.4 CITY-ST-ZIP</th><th>Change</th><th>Addition</th></tr></thead><tbody><tr><td></td><td></td><td>241 NE 38 ST # A-101</td><td>FT LAUDERDALE FL 33334</td><td><input checked="" type="checkbox"/></td><td><input type="checkbox"/></td></tr><tr><td></td><td></td><td></td><td></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr><tr><td></td><td></td><td></td><td></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr><tr><td></td><td></td><td></td><td></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr><tr><td></td><td></td><td></td><td></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr><tr><td></td><td></td><td></td><td></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr><tr><td></td><td></td><td></td><td></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr></tbody></table>				1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	Change	Addition			241 NE 38 ST # A-101	FT LAUDERDALE FL 33334	<input checked="" type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.073(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, with a letter like empowered.

SIGNATURE: John V. Balasco DATE: 4-21-99 (954) 316-8202  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (11/98)