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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000064254 (2)

STITCH-IT ENTERPRISES, INCORPORATED

Principal Place of Business

Mailing Address

FILED Jan 29 1998 8:00am Secretary of State



	0 01 000, 1000		(Halling Flad Cab		
994 E. 49TH HIALEAH FL			994 E. 49TH STREET HIALEAH FL 33013		
					DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualified 08/18/1995
2. Principal Pl	lace of Business		2a. Mailing Address		4 FEI Number Applied For
21 2690	1 W 79	ST Bart	# 20 2699 W. J	19 ST; Bay 1	# 9 65-0614931 Not Applicate
Suite, Apt	4		Suite, Apt. #, etc.	- +	□ 36 (3 Additional
Çity & Ştate			City & State (5. Certificate of Status Desired Fee Required
23 Halea	9.90		28 Haleah, t	L 32	6. Election Campaign Financing \$5,00 May Be Trust Fund Contribution Added to Fees
Zip 24 330		untry USA	Zip 33014	CountryUSA	8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30.
5/5		dress of Current	Table	301	10. Name and Address of New Registered Agent
VE	BER, JOHN			81 Name	
	4 E. 49TH STREE	T		\ <u>-</u>	
	4 E. 48111 31NEC ALEAH FL 33013	i 1		82 Street	Address (P.O. Box Number is Not Acceptable)
H	ALEAN FL 33013			83	79 N 19 31 Buy 11 C
				**	
	4.1	Λ		84 City	haleah FL 85 Zip Code 330/4
11. Pursuant t	to the provisions	Sections 607.0502	and 607.1508, Florida Statute	s, the above-named	corporation submits this statement for the purpose of changing its registere
office or re agent. Lag		both, Milha State o Legated the obligat	f Florida. Such change was au ions of, Section 607,0505. Flor	uthorized by the corp ida Statutes	poration's board of directors. I hereby accept the appointment as registered
SIGNATURE	gnature, typeday misc	MA		Registered Agent signature	
12.		OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	77.102.101.112	DELETE	1.1 TITLE	D/P/S Change Addition
NAME	YEBER, JOHN	1		1.2 NAME	
STREET ADDRESS	994 E. 49TH			1.3 STREET ADDRESS	Yeber John 2699 W 79TEST Bay #9
CITY-ST-ZIP	HIALEAH FL			1.4 CITY-ST-ZIP	Halenh, fr 33014
TITLE		100.10	DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME				2.2 NAME	3,44,5
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 TITLE			DELETE	3.4. CITY-ST-ZIP 4.1 TITLE	Change Addilic
NAME				4, 2 NAME	
STREET ADDRESS				4.3 STREET ADDRESS	
CITY-ST-ZIP				4.4 CITY - ST - ZIP	
TITLE			DELETE	5.1 TITLE	☐ Change ☐ Additio
NAME				5.2 NAME	
STREET ADDRESS				53 STHEET 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	_			6.4 CITY-ST-ZIP	
	ertify that the inform	ation supplied with	this filing does not qualify for		ad in Section 119.07(3)(i), Florida Statutes. I further certify that the information mature shall have the same legal effect as if made under oath; that I am an
officer or o Block 12 c	on this annual repoi director of the corpor or Block 13	r onsupplemental oration or na result ed, communication	ninual report is true and accu contrustee empowered to ex hear with an address.	rate and that my sig recute this report as	inature shall have the same legal effect as it made under oath; that I am an required by Chapter 607, Florida Statutes; and that my name appears in