

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

FILED

Feb 17 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000080031 (4)

1. Corporation Name

IMAGE EMBROIDERY CO., INC.

Principal Place of Business

7985 W 20TH AVE.
HIALEAH FL 33014

Mailing Address

7985 W 20TH AVE.
HIALEAH FL 33014



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 690 W. 83 street	26 690 W. 83 street			10/18/1995	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	4. FEI Number		Applied For	
22	27	65-0625034		Not Applicable	
City & State	City & State	5. Certificate of Status Desired		<input type="checkbox"/> \$8.75 Additional Fee Required	
23 Hialeah, FL	28 Hialeah, FL	6. Election Campaign Financing Trust Fund Contribution		<input type="checkbox"/> \$5.00 May Be Added to Fees	
Zip	Zip	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.		<input type="checkbox"/> Yes <input type="checkbox"/> No	
24 33014	29 33014	Country		Country	
25 USA	30 USA				
9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent		
ANANIA, FRANCIS A ESQ. 100 SOUTHEAST SECOND ST. SUITE 3300, INTERNATIONAL PLACE MIAMI FL 33131			81 Name		
			82 Street Address (P.O. Box Number is Not Acceptable)		
			83		
			84 City		
			FL 85 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 I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and filed if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	P
NAME	BARROCCAS, ISSAC	1.2 NAME	Barroccas, Isaac
STREET ADDRESS	5500 COLLINS AVE	1.3 STREET ADDRESS	690 W. 83 street
CITY-ST-ZIP	MAIM BEAHC FL	1.4 CITY-ST-ZIP	Hialeah, FL 33014
TITLE	V	2.1 TITLE	V
NAME	BARROCCAS, MARK	2.2 NAME	Barroccas, mark
STREET ADDRESS	19601 EAST COUNTRY CLUB DR.	2.3 STREET ADDRESS	690 W. 83 street
CITY-ST-ZIP	AVENTURA FL 33178	2.4 CITY-ST-ZIP	Hialeah, FL 33014
TITLE	ST	3.1 TITLE	ST
NAME	BARROCCAS, MARYLIN	3.2 NAME	Barroccas, marilyn
STREET ADDRESS	5500 COCLINS AVE	3.3 STREET ADDRESS	690 W. 83 street
CITY-ST-ZIP	MIAMI BEACH NY	3.4 CITY-ST-ZIP	Hialeah, FL 33014
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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.

SIGNATURE:

Isaac Barroccas

2/17/98 305-362-1003

CR2E034 (10/97)