

FILE NOW: FILING FEE AFTER MAY 1 IS \$25.00

PROFIT CORPORATION
ANNUAL REPORT



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

1996-1996

B-2446 C

DOCUMENT # P95000087910 (2)

1. Corporation Name
TATEWEN TRADING COMPANY, d/b/a AmeriSeam



Principal Place of Business: 903 NORMANDY TRACE RD TAMPA FL 33602
Mailing Address: 903 NORMANDY TRACE RD TAMPA FL 33602

3. Date Incorporated or Qualified: 11/15/1995
3a. Date of Last Report: --
4. FEI Number: 59-3343436
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business: 21 13801 W. Hillsborough Avenue
2a. Mailing Address: 26 P.O. Box 1133
22 Suite, Apt. #, etc.
23 City & State: Tampa, FL
24 Zip: 33635
25 Country: USA
27 Suite, Apt. #, etc.
28 City & State: Odessa, FL
29 Zip: 34677
30 Country: USA

9. Name and Address of Current Registered Agent

GARRETT, WENDY B
501 E KENNEDY BLVD 16TH FLOOR
TAMPA FL 33602

10. Name and Address of New Registered Agent

81 Name: Garrett, Wendy B
82 Street Address (P.O. Box Number is Not Acceptable): 13801 W. Hillsborough Ave.
83
84 City: Tampa FL 85 Zip Code: 33635

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: Wendy B. Garrett

DATE: 3/14/96

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE: D	<input type="checkbox"/> DELETE	1.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: GARRETT, TATE A		1.2 NAME:
STREET ADDRESS: 903 NORMANDY TRACE RD		1.3 STREET ADDRESS:
CITY-ST-ZIP: TAMPA FL 33602		1.4 CITY-ST-ZIP:
TITLE: D	<input type="checkbox"/> DELETE	2.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: GARRETT, WENDY B		2.2 NAME:
STREET ADDRESS: 903 NORMANDY TRACE RD		2.3 STREET ADDRESS:
CITY-ST-ZIP: TAMPA FL 33602		2.4 CITY-ST-ZIP:
TITLE:	<input type="checkbox"/> DELETE	3.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME:		3.2 NAME:
STREET ADDRESS:		3.3 STREET ADDRESS:
CITY-ST-ZIP:		3.4 CITY-ST-ZIP:
TITLE:	<input type="checkbox"/> DELETE	4.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME:		4.2 NAME:
STREET ADDRESS:		4.3 STREET ADDRESS:
CITY-ST-ZIP:		4.4 CITY-ST-ZIP:
TITLE:	<input type="checkbox"/> DELETE	5.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME:		5.2 NAME:
STREET ADDRESS:		5.3 STREET ADDRESS:
CITY-ST-ZIP:		5.4 CITY-ST-ZIP:
TITLE:	<input type="checkbox"/> DELETE	6.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME:		6.2 NAME:
STREET ADDRESS:		6.3 STREET ADDRESS:
CITY-ST-ZIP:		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)(f), 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: Tate J. Garrett
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE: 3/14/96
DAYTIME PHONE: 813 854-1128

CR2E034 (12/95)