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

PROFIT CORPORATION **ANNUAL REPORT**

1997

STREET ADDRESS

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

POCUMENT # P95000092131 (8)

AMERICAN LEATHER CORPORATION

Principal Place of Business Mailing Address 2775 EAST 10TH AVENUE #B 2775 EAST 10TH AVENUE #B HIALEAH FL 33013 HIALEAH FL 33013-3707 3a. Date of Last Report 3. Date Incorporated or Qualified 12/01/1995 07/02/1996 2. Principal Place of Business 2a. Mailing Address 4. FFI Number Applied For 65-0631479 Not Applicable 26 Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Bo Trust Fund Contribution 23 Added to Fees 28 Country Zip Country Zip 8. This corporation has liability for intangible tax under s. 199.032, 24 Florida Statutes Yes 🕅 No 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 CRUZ. OSCAR Name 2775 EAST 10TH AVENUE #B 82 Street Address (P.O. Box Number is Not Acceptable) HIALEAH FL 33013 83 84 Zio 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 title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. (96/6) Change Addition TITLE DELETE 11 117LE CRUZ, OSCAR NAME 1.2 NAME 2775 EAST 10TH AVENUE #B STREET ADDRESS 1.3 STREET ADDRESS HIALEAH FL 33013 CITY-ST-ZIP 1.4 C(1Y - S1 - Z(P DELETE Change Addition TITLE 2.1 HITLE SANTAMARIA, MARIA L NAME 2.2 NAME 2775 EAST 10TH AVENUE #8 STREET ADDRESS 2.3 STREET ADDRESS HIALEAH FL 33013 CITY-ST-ZIP 2 4 CHY-ST-ZIP DELFTE Change Addition TITLE 3.1.111LE NAME 3.2 NAME STREET ADDRESS 3.3 S16FE1 ADDRESS CITY-ST-ZIP 3.4. CITY - \$1 - ZIP DELETE Change Addition TITLE 4.110 LE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 DHY - \$1 - ZIP DELETE Change ___ Addition TITLE 51 IDLE NAME 5.2 NAME STREET ADDRESS 5.3 BIREFT ADDRESS CITY-ST-ZIP 5.4 €(1 Y - \$1 - Z(f) Change 'TITLE DELETE 6.1 TITLE Addition NAME 6.2 NAME

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 an attachment with an address.

14. I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the

6.3 \$1REE1 ADDRESS

FILED

May 12 1997 8:00am

Secretary of State