FILED Oct 07 1998 8:00am/ Secretary of State

ANNUAL REPORT (Secretary DIVISION OF Co		Secretary of State	
DOOLINE #	000047164 (4)			
{	` '			
UPHOLSTERY AND SEWING	INSTITUTE, INC.			IL (1848 4111) 9161 4841
				d 17 870 1 686 463 6 2 83 6
Principal Place of Business	Mailing Address		A REGISTRY HE TO THE STATE BOATS BOATS BOATS BOATS BOATS BOATS BOATS	1 11 010 01111 0101 1001
928 S. KIMBREL AVE.	928 S KIMBREL AVE			
PANAMA CITY FL 32404	PANAMA CITY FL 32404 US		DO NOT WRITE IN THIS SPACE	=
	US		3. Date Incorporated or Qualified	<u> </u>
			05/28/1996	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	[26]		59-3381357	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5 Certificate of Status Desired 1 1 1	75 Additional be Required
City & State	City & State			.00 May Bo
23	28			ded to Fees
Zip Country	2ip	Country	8. This corporation owes or has paid the current year	J
[24] [25]	29 29 3 of Current Registered Agent	30	Personal Property Tax due June 30. Yes 10. Name and Address of New Registered Agent	_L_]No
PORTER, MARVIN	or content registered Agent	81 Name	10. Name and Address of New Registered Agent	
928 S. KIMBREL AVE.		82 Street Add	Iress (P.O. Box Number is Not Acceptable)	
PANAMA CITY FL 32404			ress (F.O. Box Number is Not Acceptable)	
		83		
		84 City	— [85]	Zip Code
			<u> </u>	
office or registered agent, or both, in	the State of Florida. Such change was au	the above-named corporat thorized by the corporat	oration submits this statement for the purpose of changing i ion's board of directors. I hereby accept the appointment a	its registered as registered
·	the obligations of, section 607.0505, Flori	da Statutes.		
SIGNATURE Signature, typed or profited name of re	gestured agent and title if applicable (NOTE	Registered Agent signature rec	quired when reinstating) DATE	
in the second se	DERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRE	
TITLE D	[] DELETE	1.1 TITLE	L Cha	nge [] Addition
NAME PORTER, MAY J STREET ADDRESS 928 S. KIMBREL AVE.		1.2 NAME		ł
STREET ADDRESS 928 S. KIMBHEL AVE.	14	13 STREET ADDRESS		į
TITLE D	DELETE	2 1 TITLE	Chai	nge [] Addition
NAME PORTER, BRONKELLY		2 2 NAME	C. J. Orial	Ac F" 1 Vanital)
STREET ADDRESS 928 S. KIMBREL AVE.		23 STREET ADDRESS		
CITY-ST-ZIP PANAMA CITY FL 3240		2.4 CITY-ST-ZIP		
TITLE D	DELETE	3.1 TITLE	[] Cha	nge [] Addition
NAME PORTER, MARVIN STREET ADDRESS 928 S. KIMBREL AVE.		3.2 NAME	-10/08/9801011037	·
STREET ADDRESS 928 S. KIMBHEL AVE. CITY-ST-ZIP PANAMA CITY FL 3240	14	3.9 STREET ADDRESS 3.4 City-St-Zip	***150.00	ł
TITLE	DELETE	4.1 TITLE	Con	ge Addition
NAME	E. Juneau 1	4.2 NAME		- Li riogilion
STREET ADDRESS		4.3 STREET ADDRESS	4	ノカノラー
CITY-ST-ZIP		4.4 CITY-ST-ZIP		144
TITLE	DELETE	5.1 TITLE	[] Char	nge Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	DELETE	5.4 CITY-ST-ZIP 6.1 TITLE	Char	nge Addition
NAME	[JOECE 1E	62 NAME	L J Char	iBo [" Modibot)
STREET ADDRESS		6.3 STREET ADDRESS		ł
CITY-S1-ZIP		6.4 CITY-ST-ZIP		ł

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 early 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 13 or on an attachment with an address.

SIGNATURE:

Mary W. Hortek, A

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