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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000097588 (3)

GULFWIND EMBROIDERY AND APPAREL, INC.

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Principal Plac	o of Business	Mailine As													
		•	Mailing Address					'''			*****		.0.004 01401 10	1441 1411 1	T)
4214 18TH AVENUE DRIVE WEST 4214 18TH AVENUE DRIVE BRADENTON FL 34205-145															
								3. Date I	ncorpora /1996	ted or Qu	ualified	3a. Da	ate of Last	Repo	rl
	lace of Business	2a. Mailing	Address					4. FEI Nu			121			Applie	d For
21	4 - 1 -	26						. <u>ځ</u> و)	- O	1194	124	• 			plicable
Sulte, Apt.	#, etc.	27 Suite, 7	Suite, Apt. #, etc.					5. Certific	cate of St	tatus Des	ired		\$8.75 Fee	Addii Requir	
I City & Stat	е	City 8	City & State					6. Electic	n Campa	aign Fina	neing		\$5.0	0 May	/ Be
23		28		,				Trust F	und Cor	tribution				d to Fe	
Zip	Country	Ζφ		L Cou	nlry							ntangible	tax under	rs. 199	9.032,
24	25 9. Name and Address of Curre	[29]		30					Statutes				No		
		ent Registered A	gent		81	Name		10. Name	and Add	dress of	New Reg	lstered	Agent		
	VANO, WILLIAM S				٥'	IVallie	Ľ	Javid	' /Ν.	Sil	bers	tein			
	MANATEE AVENUE WEST				82	Street	Addre	ss (P.O. Bo	Numbe	r is Not A	cceptabl	e)	•		
DHA	DENTON FL 34206				83			20 5.	Ur	ange	_ Av	unu	e_		
					84	City							85 Zu	o Code	
						•		sara,	sota	-		<u>FL</u>		3423	6
11. Pursuant office or r	to the provisions of Sections 607.05 eginered adont or both in the Sta m amiliar with and pot pot the com-	502 and 607,1508 te of Torloa Suz	Florida Statu	les, the at authorized	ove Lbv	-named the col	d corpo rooratio	ration subm n's board ol	its this st f director	atement :	for the pu	irpose of	changing	j its reg	gistered
agent.la	m amiliar with, and popent the election	9/21/11/	2507- 0505, FI	orida Stat	utes						بر ار	√.	OII II I I I I	io regi	0101013
SIGNATURE	MIN VX		/							4	115/	97			
12.	Signature, tripes or printed runned registere a OFFICERS AI	NU DIRECTORS	e (NO	13.	I Ager	nt signatur	re required	when reinstating		NOEG T	O OFFICE	DATE	DIDERT	200 11	1.16
TITLE	D	IND BINEOTONS	DELETE	1.1 Til	1 F			ALILITIA	JNS/CHA	ANGES I	O OFFICE	. HS ANL	DIRECTO Change		Addition
NAME	WHALEN, JAMES D			1.2 NA									Lang Gridings	_	, , , , , , , , , , , , , , , , , , , ,
STREET ADDRESS	4550 47TH STREET WEST, A	PARTMENT 111				ADDRESS									
CITY-ST-ZIP	BRADENTON FL 34210			1.4 CH											
TITLE	D		DELETE	2.1 TIT			1						Change	2	Addition
NAME	CLINE, JACKIE M			2.2 NA	ME								_ *		
STREET ADDRESS	5403 ALOHA DRIVE			2.3 ST	REE1 A	ADDRESS	ĺ								
CITY-ST-ZIP	ST. PETERSBURG FL 33706			2. 4 CI	TY-S	T- Z (P									
TITLE	D		DELETE	3.1 117	LF		1						Change	, [Addition
NAME	Stern, Walter III			3.2 NA	ME										
STREET ADDRESS	4214 18TH AVENUE DRIVE W	/EST		3.3 ST	REET A	ADDRESS									
CITY-ST-ZIP	BRADENTON FL 34205			3.4. CI	TY-SI	I - ZIP									
TITLE			DELETE	4.1 T(T	LE								Change	, [Addition
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14. Id 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.

IGNATURE: X Paris Helling CJames D. Whalen Hidge

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FILED

Apr 23 1997 8:00am

Secretary of State