1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P98000064750

CAM FABRICS, INC.

## FILED Apr 06, 1999 8:00 am Secretary of State

04-06-1999 90015 048 \*\*\*150.00

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| Principal Place   | e of Busines  | s   | Ma  | ailing Address   |                                   |  |  |  |   |                | ,                                     |  |
|---|---|---|---|--|-----------------------------------|--|--|--|---|----------------|---------------------------------------|--|
| 426 CLEMATIS ST   |   |   |   | 426 CLEMATIS ST  |                                   |  |  |  |   | •              |                                       |  |
| WEST PALM BEACH FL 33401  |   |   |   | WEST PALM BEACH FL 33401                                 |                                   |  |  |  |   |                | 02405                                 |  |
|   |   |   |   |  |                                   |  |  |  |   | RITE IN THIS   | SPACE                                 |  |
|   |   |   |   |  |                                   |  |  |  | 3. Date Incorporated or Qualifet 07/23/1998 | 0              |                                       |  |
| 2. Principal P  | lace of Busir   | ness  | 2a.   | Mailing Addre  | ess                               |  |  |  | 4. FEI Number                               |                | A A                                   | oplied For   |
| 21  |   |   | 26  |  |                                   |  |  |  | 65-08365                                    | 3/             | N                                     | ot Applicable                                      |
| Suite, Apt. #, etc.   |   |   | 11  | Suite, Apt. #, etc.                                      |                                   |  |  |  | E Cadifacto of Status Desired               |                | \$8.75                                | Additional   |
| 22  |   |   | 27  | The continue was a second of the second                  |                                   |  |  | + - =  | -5. Certificate of Status Desired           |                | Fee R                                 | equired  |
| City & State  |   |   | 1-1   | City & State   |                                   |  |  |  | 6. Election Campaign Financing              | , _            | \$5.00                                | May Be   |
| 23  |   |   | 28  | ¬ '  |                                   |  |  |  | Trust Fund Contribution                     |                |                                       | to Fees  |
| Zip   |   | Country   | 1   | Zip  | -                                 | Countr   | у  |  | 8. This corporation owes the cu             | rrent year Int | angible                               |  |
| 24  |   | 25  | 29  |  | [                                 | 30   |  |  | Personal Property Tax.                      | •              | Yes                                   | □No  |
|   |   | and Address of Cu   |   | tered Agent  |                                   | 1  |  |  | 10. Name and Address of New                 | Registered     | Agent                                 |  |
|   | ••  |   |   |  |                                   | 8  | 1 1  | Name   |   |                |                                       | -  |
|   | NUM, MEL/   |   |   |  |                                   | ļ  |  | O  | (D.O. Day Number is Not Asses               | table)         |                                       | i  |
| 426   | <b>CLEMATIS</b>   | ST  |   |  |                                   | 82   | 2 3  | Street Addres                                      | ss (P.O. Box Number is Not Accep            | navie)         |                                       | 1  |
| WES   | T PALM BE   | EACH FL 33401   |   |  |                                   | 83   | 3  |  |   |                |                                       |  |
|   |   |   |   |  |                                   |  |  |  |   |                |                                       |  |
|   |   |   |   |  |                                   | 84   | 4 (  | City   |   | FL             | 85   Zip                              | Code   |
|   |   |   | 7.0500 1.04   |  |                                   |  |  |  | oration submits this statement for th       | e nurnose of   | changing its                          | registered   |
| 11 Pursuanti  | to the provis   | ions of Sections 607  |   |  | t - Mankuta                       |  |  |  |   |                |                                       | , .og ,  |
| office or re  | ronistorod an   | ent or both in the S  | State of Florid   | ia. Such chand   | ie was au                         | ithorizea bi   | v ine  | e corporation                                      | n's board of directors. I hereby acc        | ept the appoi  | ntment as re                          | egistered )  |
| office or re  | ronistorod an   | ent, or both, in the S<br>th, and accept the o  | State of Florid   | ia. Such chand   | ie was au                         | ithorizea bi   | v ine  | e corporation                                      | n's board of directors. I hereby acc        | ept the appoi  | ntment as re                          | egistered )  |
| office or re<br>agent. I a  | registered ag<br>ım familiar wi   | ent, or both, in the S<br>th, and accept the o  | State of Florid<br>Ibligations of,  | ia. Such chang<br>Section 607.0                          | je was au<br>505, Flor            | itnorized by<br>ida Statute  | y ine<br>es.   | e corporation                                      | n's board of directors. I hereby according  | ept the appoi  | ntment as re                          | egistered  |
| office or re  | registered ag<br>ım familiar wi   | ent, or both, in the S<br>th, and accept the o<br>or printed name of registers  | State of Florid bligations of, and title in                               | da. Such chang<br>Section 607.0                          | je was au<br>505, Flor            | ida Statute<br>Registered Ag   | y ine<br>es.   | e corporation                                      | when reinstating)                           | DATE           | ingine ii da ii                       | -  |
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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, with all other like empowered.

SIGNATURE:

561-833-2000