

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2007 8:00 am
Secretary of State

05-01-2007 90046 031 ***150.00

DOCUMENT # P99000009639

1. Entity Name
COTTON TEE'S & EMBROIDERY, INC.



Principal Place of Business
**3301 W OAK STREET
KISSIMMEE, FL 34741**

Mailing Address
**3301 W OAK STREET
KISSIMMEE, FL 34741**

40096320



2. Principal Place of Business - No P.O. Box #
**961-C ARMSTRONG
Suite, Apt. #, etc. BLVD**

3. Mailing Address
**961-C ARMSTRONG
Suite, Apt. #, etc. BLVD**

04152007 Chg-P CR2E034 (12/06)

City & State
KISSIMMEE, FL
Zip
34741
Country
USA

City & State
KISSIMMEE, FL
Zip
34741
Country
USA

4. FEI Number
59-3496539
Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**HUSSAIN, A.K.M.S.
4378 CREEKSIDE BLVD.
KISSIMMEE, FL 34746**

7. Name and Address of New Registered Agent

Name
AKM S HUSSAIN
Street Address (P.O. Box Number is Not Acceptable)
2706 BARTLET DR.
City
KISSIMMEE FL Zip Code
34741

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *A.K.M. Hussain* **AKM S HUSSAIN** 4/15/07
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME **P** ☐ Delete
HUSSAIN, A.K.M.S.
STREET ADDRESS
4378 CREEKSIDE BLVD
CITY-ST-ZIP
KISSIMMEE, FL 34746

TITLE
NAME **D** ☐ Delete
HUSSAIN, ANGELA
STREET ADDRESS
4378 CREEKSIDE BLVD
CITY-ST-ZIP
KISSIMMEE, FL 34746

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME **PRESIDENT** ☒ Change ☐ Addition
AKM S HUSSAIN
STREET ADDRESS
2706 BARTLET DR.
CITY-ST-ZIP
KISSIMMEE, FL 34741

TITLE
NAME **SECRETARY** ☒ Change ☐ Addition
ANGELA HUSSAIN
STREET ADDRESS
2706 BARTLET DR.
CITY-ST-ZIP
KISSIMMEE, FL 34741

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *A.K.M. Hussain* **AKM S HUSSAIN** 4/15/07 (407) 8108420
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #