

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED
MAY -1 PM 2:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **S53661** (2)

1. Corporate Name
AAA SEW-VAC, INC.

Principal Place of Business: **741 SOUTH ORANGE BLOSSOM TRAIL APOPKA FL 32703-3708**
Mailing Address: **741 SOUTH ORANGE BLOSSOM TRAIL APOPKA FL 32703-3708**

DO NOT WRITE IN THIS SPACE

2. Date of Filing of Report	2a. Mailing Address	3. Date Incorporated or Qualified	3a. Date of Last Report
21	26	04/26/1991	02/22/1994
22. State, Apt. # etc.	27. State, Apt. # etc.	4. FEI Number	Applied For
22	27	59-3067782	Not Applicable
23. City, State	28. City & State	5. Certificate of Status Desired	\$8.75 Additional Fee Required
23	28	<input type="checkbox"/>	
24. Zip	25. County	29. Zip	30. County
24	25	29	30
6. Election Campaign Financing Trust Fund Contribution		<input type="checkbox"/> \$5.00 May Be Added to Fees	
7. This corporation has liability for applicable tax under S 1381 D32, Florida Statute		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
DESANTO, JOHN 5901 LAKEVILLE RD ORLANDO FL 32818		B1	Name
		B2	Street Address, P.O. Box Number, Not Acceptable
		B3	
		B4	City
		FL	B5 Zip Code

11. Pursuant to the provisions of Sections 607.01(2) and 607.1509, Florida Statutes, this above named corporation submits this statement for the purpose of changing its registered office or registered agent of record 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 hereby authorized to accept the obligations of Section 607.01(2), Florida Statutes.

SIGNATURE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1. TITLE	1. NAME	1. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2. NAME	2. NAME	2. NAME	
3. STREET ADDRESS	3. STREET ADDRESS	3. STREET ADDRESS	
4. CITY, STATE	4. CITY, STATE	4. CITY, STATE	
5. TITLE	5. NAME	5. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6. NAME	6. NAME	6. NAME	
7. STREET ADDRESS	7. STREET ADDRESS	7. STREET ADDRESS	
8. CITY, STATE	8. CITY, STATE	8. CITY, STATE	
9. TITLE	9. NAME	9. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
10. NAME	10. NAME	10. NAME	
11. STREET ADDRESS	11. STREET ADDRESS	11. STREET ADDRESS	
12. CITY, STATE	12. CITY, STATE	12. CITY, STATE	
13. TITLE	13. NAME	13. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
14. NAME	14. NAME	14. NAME	
15. STREET ADDRESS	15. STREET ADDRESS	15. STREET ADDRESS	
16. CITY, STATE	16. CITY, STATE	16. CITY, STATE	

14. I, the undersigned, certify that the information supplied with this filing is substantially true and does not qualify for the exemption stated in Section 1381.01(2), Florida Statutes. I further certify that the information included on this annual report or supplementary 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 a trustee, employee or partner in the report as required by Chapter 607, Florida Statutes, and that my name appears on Block 1 or Block 13 of this report, or on an attachment with an address.

SIGNATURE: *John A. Desanto* JOHN A. DESANTO 5-1-95 407/886-4666