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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # V12230 (1) C & R ALTERATIONS AND TAILORING, INC.  Principal Place of Business Mailing Address							
2044 SOUTH MILITARY TRAIL 2044 SOUTH MILITARY TRA							
WEST PALM E	BEACH FL 33415	WEST PALM BEACH FL.	33415-6411				
•					3. Date Incorporated or Qualified 02/07/1992	3a. Date of Last F 04/18/1996	Report
2. Principal Place of Business 2a. Mailing Address				4. FEI Number	} <del></del>	oplied For	
		26 Suito Apl # oto	Suite, Apt. #. etc.		65-0317855		ot Applicable
22 27		——————————————————————————————————————	n. H. 010.		5. Certificate of Status Desired	,	Additional equired
City & State	0	City & State			6. Election Campaign Financing		May Be
23		28		Trust Fund Contribution		to Fees	
Zip	Country Zip		Countr	у	8. This corporation has liability for intringible tax under s. 199.032,		
24	25	29	[30]		Florida Statutes		
OTC	9, Name and Address of Currer	it Registered Agent	81	Name	10. Name and Address of New Re	gistereo Agent	
STEWART, COLLIN 2044 SOUTH MILITARY TRAIL							
WEST PALM BEACH FL 33415			82	Street Add	dress (P.O. Box Number is Not Acceptab	ole)	
***	or train periorite corre		83	<del> </del>		·	{
			84	City		ne Zio	Code
			1	1 '			1
11. Pursuant office or r agent. I a	to the provisions of Sections 607.050 egistered agent, or both, in the State im familiar with, and accept the oblig	02 and 607.1508, Florida Statut e of Florida. Such change was lations of, Section 607.0505, Fl	tes, the abov authorized b lorida Statute	re-named cor by the corpora ss.	rporation submits this statement for the pation's board of directors. I hereby accept	ourpose of changing i of the appointment as	ts registered registered
SIGNATURE		······································	·				
40				ent signature requ	uired when reinstating)  ADDITIONS/CHANGES TO OFFICE	DATE DIRECTOR	OC IN 12
12.	PD OFFICERS AN	DELETE		<u> </u>	ADDITIONS/CHANGES TO OFFIC	Change	Addition
NAME	STEWART, COLLIN	_	1.2 NAME				
STREET ADDRESS	676 SNEAD CIRCLE			1 ADDRESS			] [
CITY-ST-ZIP	WEST PALM BEACH FL		1.4 CITY-	ST-ZIP			[
TITLE	SD	DELETE 21				Change	Addition C
NAME	STEWART, RUTH						
STREET ADDRESS	791 SNEAD CIRCLE WEST PALM BEACH FL			1 ADDRESS	•		
CITY-ST-ZIP TITLE	DELETE		2 4 CHY-	S1 - ZIP		Change	Addition
NAME			3.2 NAME			L., Onange	E- AUGINUI
STREET ADDRESS			1	I ADDRESS			Í
City-St-ZiP			3.4. City-	I .			
TITLE		DELETE	4.1 TITLE			Change	Addition
NAME			4. 2 NAME				į
STREET ADDRESS		4.8		T ADDRESS			
CITY-ST-ZIP	<del></del>	T SELECT	4.4 CHY-	SI-ZIP			1
TITLE	,	DELETE	5.1 TITLE			Change	☐ Addition
NAME			5.2 NAME	TADODCCO			}
STREET ADDRESS			5.3 STREE 5.4 CITY-	T ADDRESS			ļ
CITY-ST-ZIP TITLE		5.4 DELETE 6.1		01-711.		☐ Change	Addition
NAME			6.2 NAME				
STREET ADDRESS				1 ADDRESS			j
CITY+ST-ZIP			6.4 CITY-	1			ĺ

14. I do 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 12 or on an attachment with an address.