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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V63267 1. Corporation Name

RONALD CARROLL FABRICS, INC.

110111120							
Principal Place of Business Mailing Address					The same of the sa	-	
1190 STERLING	RD	1190 STERLING RD.			·		
SUITE B-1	4	SPACE B-1 Dania FL 33004			DO NOT WRITE IN THIS SE	PACE	
DANIA FL 33004 US	4	US			3. Date Incorporated or Qualifed		
					09/11/1992		
2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number	Applied For	
21		26			65-0355149	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional	
22		27	27		J. Goldings of Glades Total Co.	Fee Required	
City & State		City & State			6. Election Campaign Financing	\$5.00 May Be	
23		28		*	Trust Fund Contribution Added to Fees		
Zip	Country	Zip	Count	ry	8. This corporation owes the current year Intang		
24	25		30		Personal Property Tax. 10. Name and Address of New Registered Ag		
	9. Name and Address of Curre	nt Registered Agent	5	1 Name	10. Name and Address of New Registered Ag	GIR	
REC	KER, JACQUELINE			Name			
3520 N. 53 AVENUE			· [8	82 Street Address (P.O. Box Number is Not Acceptable)			
SPACE B-1			-	3		7.75	
HOLLYWOD FL 33021				3	Section 5		
HOLLI WOD I E GOOZI			1	4 City	FL	85 Zip Code	
						anging its registered	
office or ragent. I a	equistered agent, or both, in the State m familiar with, and accept the oblig	exis	_		poration submits this statement for the purpose of chion's board of directors. Thereby accept the appointment of the purpose of the purpose of chion's board of directors. Thereby accept the appointment of the purpose of chion's board of directors.	nent as registered	
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND		
TITLE	PST	☐ DELETÉ	1.1 TITE		The state of the s	Change Addition	
NAME	BECKER, JACQUELINE		1.2 NAM	E			
STREET ADDRESS	3520 N. 53RD AVE.		1.3 STR	ET ADDRESS	- A-1		
CITY-ST-ZIP	HOLLYWOOD FL		1.4 CITY	-ST-ZIP			
TITLE		☐ DELETE	2.1 TITL	.		☐ Change ☐ Addition	
NAME			2.2 NAM	E			
STREET ADDRESS			2.3 STR	EET ADORESS			
CITY-ST-ZIP			2. 4 CIT	(-ST-ZIP		CONTRACTOR	
TITLE		☐ DELETE	3.1 TITL	€	L	Change Addition	
NAME .			3.2 ŅAM	E			
STREET ADDRESS				EET ADDRESS			
CITY-ST-ZIP		□ BELETE		/-ST-ZIP		Change Addition	
TITLE		☐ DELETE	4.1 TITL	1			
NAME			4, 2 NA	1			
STREET ADDRESS				EET ADDRESS			
CITY-ST-ZIP		☐ DELETE	4.4 CiT\	-ST-ZIP		☐ Change ☐ Addition	
TITLE		☐ DELETE	5.1 IIIL 5.2 NAM		•		
NAME				EET ADDRESS			
STREET ADDRESS				-ST-ZIP			
CITY-ST-ZIP		<u> </u>	U.4 OIT	-01-211			

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 trustey impowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapted, or on an attachment with any address, with all other like-sympowered. CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

STREET ADDRESS

DELETE

Change

☐ Addition

FILED

Feb 10, 1999 8:00am

Secretary of State

02-10-1999 90019 019 ***150.00