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

FILED
Jun 10 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1998

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

DOCUMENT # 315500 (9)

1. Corporation Name
SUPREME INTERNATIONAL CORPORATION

Principal Place of Business	Mailing Address
7495 N.W.48TH STREET MIAMI FL 33166	7495 N.W.48TH STREET MIAMI FL 33166

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/05/1967

2. Principal Place of Business	2a. Mailing Address
21 3000 N.W 107th AVE	26 3000 N.W 107th AVE
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 MIAMI	City & State 28 MIAMI
Zip 24 33172 Country 25 DADE	Zip 29 33172 Country 30 DADE

4. FEI Number: 59-1162998 ☐ Applied For ☐ Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
FELDENKREIS,GEORGE 7495 N. W. 48 STREET MIAMI FL 33166	81 Name 82 Street Address (P.O. Box Number is Not Acceptable): 3000 N.W 107th AVENUE 83 84 City: MIAMI **FL** 85 Zip Code: 33172

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, 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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	FELDENKREIS, OSCAR		1.2 NAME		
STREET ADDRESS	13205 BISCAYNE ISLAND		1.3 STREET ADDRESS		
CITY-ST-ZIP	N MIAMI, FLORIDA 00000		1.4 CITY-ST-ZIP		
TITLE	CD	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	FELDENKREIS, GEORGE		2.2 NAME		
STREET ADDRESS	7495 N. W. 48 STREET		2.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL		2.4 CITY-ST-ZIP		
TITLE	V	☐ DELETE	3.1 TITLE		☒ Change ☐ Addition
NAME	ROISMAN, JOSEPH		3.2 NAME		
STREET ADDRESS	7495 NW 48 ST		3.3 STREET ADDRESS	3000 N.W 107th AVE	
CITY-ST-ZIP	MIAMI FL		3.4 CITY-ST-ZIP	MIAMI FL 33172	
TITLE	ST	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	HANONO, FANNY		4.2 NAME		
STREET ADDRESS	1805 NE 198TH TERR		4.3 STREET ADDRESS		
CITY-ST-ZIP	N MIAMI BEACH FL		4.4 CITY-ST-ZIP		
TITLE	V	☒ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	DUNN, RICHARD L.		5.2 NAME		
STREET ADDRESS	7495 NW 48TH ST.		5.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL		5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE	300001255509051	☐ Change ☐ Addition
NAME			6.2 NAME	-06/11/98--01066--039	
STREET ADDRESS			6.3 STREET ADDRESS	***150.00	
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E034 (10/97)

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.

SIGNATURE: