FILED
Apr 16, 2004 8:00 am
Secretary of State
04-16-2004 90419 039 ****50.00

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L02000031076

1. Entity Name
PHI APPAREL COMPANY, LLC

Principal Place of Business	Mailing Address
9572 NW 41 STREET MIAMI, FL 33017-8	9572 NW 41 STREET MIAMI, FL 33017-8

DO NOT WRITE IN THIS SPACE

04052004 No Chg-LLC CR2E083 (10/03)

4. FEI Number
46-0510102
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

CAMPO, YESIT J CPA
9572 NW 41 STREET
MIAMI, FL 33178

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re instating)

Filing Fee is $50.00
Due by May 1, 2004

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGR
NAME	JASSIR, FRANSISCO
STREET ADDRESS	9572 NW 41 STREET
CITY-ST-ZIP	MIAMI, FL 33178
TITLE	MGR
NAME	TRIBIN, JORGE F
STREET ADDRESS	9572 NW 41 STREET
CITY-ST-ZIP	MIAMI, FL 33178
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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11. 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 report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #