2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000103599

FILED Apr 14, 2008 Secretary of State

Entity Name: ARIAL APPAREL, INC. **Current Principal Place of Business: New Principal Place of Business:** 32535 WOLF BRANCH LN SORRENTO, FL 32776 **Current Mailing Address: New Mailing Address:** 32535 WOLF BRANCH LN SORRENTO, FL 32776 FEI Number: 20-1368816 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HARRINGTON, ARIAL MAGNO, SHERRY 32535 WOLF BRANCH LN 32535 WOLF BRANCH LN SORRENTO, FL 32776 SORRENTO, FL 32776 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. SIGNATURE: SHERRY MAGNO 04/14/2008 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition HARRINGTON, ARIAL Name: Name: 32535 WOLF BRANCH LN Address: Address: City-St-Zip: SORRENTO, FL 32776 City-St-Zip: () Delete Title: VΡ Title: () Change () Addition Name: MAGNO, SHERRY A Name: 32535 WOLF BRANCH LANE Address: Address: SORRENTO, FL 32776 US City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

VΡ SIGNATURE: SHERRY MAGNO 04/14/2008