

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000042622 (7)

1. Corporation Name

PREMIER SPORTSWEAR CORP.



Principal Place of Business

Mailing Address

3300 N.E. 192ND STREET
APT 1009
AVENTURA FL 33180

3300 N.E. 192ND STREET
APT 1009
AVENTURA FL 33180

NEW ADDRESS

2. Principal Place of Business

21 6250 PALM TRACE LANDINGS DRIVE

2a. Mailing Address

26 6250 PALM TRACE LANDINGS DR.

3. Date Incorporated or Qualified

05/22/1995

3a. Date of Last Report

4. FEI Number

65-0588870

☒ 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 has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

Suite, Apt. #, etc.

22 # 313

Suite, Apt. #, etc.

27 # 313

City & State

23 DAVIE, FL.

City & State

28 DAVIE, FL.

Zip

24 33314

Country

25 BROWARD

Zip

29 33314

Country

30 BROWARD

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GUACCI, FRANCO
3300 N.E. 192ND STREET
APT 1009
AVENTURA FL 33180

81 Name GUACCI, FRANCO

82 Street Address (P.O. Box Number is Not Acceptable)

83 6250 PALM TRACE LANDINGS DRIVE # 313

84 City DAVIE

FL

85 Zip Code 33314

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

D
NAME GUACCI, FRANK
STREET ADDRESS 3300 N.E. 192ND STREET
CITY-ST-ZIP AVENTURA FL 33180

TITLE ☐ DELETE

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/96 (954)316.9980

Date

Daytime Phone #

CR2E034 (12/95)