

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **S59995** (8)

1. Corporation Name
DELTA GARMENT MANUFACTURERS OF FLORIDA, INC.



Principal Place of Business: **80 S.W. 8TH ST., 20TH FLOOR MIAMI FL 33130**
Mailing Address: **C/O ANDRES BOLANO C.P.A. 75 VALENCIA AVENUE SUITE 705 CORAL GABLES FL 33134 US**

3. Date Incorporated or Qualified: **06/13/1991**
3a. Date of Last Report: **06/30/1995**
4. FEI Number: **65-0270470**
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

2. Principal Place of Business
21. Suite, Apt. #, etc.
22. City & State
23. Zip
24. Country
25. Country
26. Mailing Address
27. Suite, Apt. #
28. City & State
29. Zip
30. Country

9. Name and Address of Current Registered Agent

**ARTEAGA, FERNANDO
75 VALENCIA AVE
STE 705
CORAL GABLES FL 33134**

10. Name and Address of New Registered Agent

81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83. City & State
84. City
85. Zip Code

11. Pursuant to the provisions of Sections 607.09(2) and 607.15(6), 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 a change was authorized by the corporation's board of directors. The city, address, and appointment as registered agent I am familiar with, and I accept the appointment of Section 607.15(6), Florida Statutes.

SIGNATURE: *[Signature]*

20/05/96

12. OFFICERS AND DIRECTORS
12.1 NAME: **D ARTEAGA, FERNANDO**
12.2 STREET ADDRESS: **688 CAMPO ALEGRE**
12.3 CITY, ST, ZIP: **QUITO, ECUADOR**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
13.1 NAME: Change Addition
13.2 STREET ADDRESS: Change Addition
13.3 CITY, ST, ZIP: Change Addition
13.4 NAME: Change Addition
13.5 STREET ADDRESS: Change Addition
13.6 CITY, ST, ZIP: Change Addition
13.7 NAME: Change Addition
13.8 STREET ADDRESS: Change Addition
13.9 CITY, ST, ZIP: Change Addition
13.10 NAME: Change Addition
13.11 STREET ADDRESS: Change Addition
13.12 CITY, ST, ZIP: Change Addition

14. I do hereby certify that the information supplied with this filing is verifiably furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information included on this annual report is prepared and approved in good faith and 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 and am duly empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if applicable and is correctly typed with a number.

SIGNATURE: *[Signature]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

20/05/96

CR2E034 (12/95)