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

PROFIT **CORPORATION ANNUAL REPORT** 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000023404 (2)

KULTURE KLOTHES BY ISIS, INC.

FILED May 19 1998 8:00am Secretary of State



Principal Place	of Business	Mailing Address		1 14911491 114 14114 41111 40111 40111 40111 4	ing tibbé jisti giáit Bairt aibt iabt
18327 NW 7TH AVE MIAMI FL 33169 US		18327 NW 7TH AVE Miami FL 33169 US		DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	
				03/11/1996	
	ace of Business	2a. Mailing Address	- A.	4. FEI Number	Applied For
21 1832	7NW Three	26 18327 N C	U ITIME	65-0649668	Not Applicable
Suite, Apt.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
	mri florida	City & State 28 Mi Ami	floria	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid th	
24	Non 25 Dade	29 33139	30 DADE	Personal Property Tax due June 30. 10. Name and Address of New Registe	Yes No
	NAUGHT, MAISIE	N/A			
18327 NW 7TH AVENUE MIAMI FL 33169 82 Street Addre				ress (P.O. Box Number is Not Acceptable)	
MIAMI FL 33109				4.1.4	
				NIA	
,			84 City	NIA	FL 85 Zip Code A
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 fegistered					
11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statules, the above-named corporation submits this statement for the purpose of changing its fegistered 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		13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE	ð	DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	MCNAUGHT, MAISIE		1.2 NAME		;
STREET ADDRESS	18327 NW 7TH AVENUE		1.3 STREET ADDRESS		Į į
CITY-ST-ZIP	MIAMI FL 33169		1.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	2.1 TITLE		Change Addition
NAME	MCNAUGHT, NOEL		2.2 NAME		
STREET ADDRESS	18327 NW 7TH AVENUE		2.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33169		2.4 CITY - ST - ZIP		
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	3.4. CITY- ST- ZIP		Change Addition
TITLE		☐ Acreic	4.1 TITLE		C Change C Fundation
NAME			4. 2 NAME 4.3 STREET ADDRESS		
STREET ADDRESS			•		
CITY-ST-ZIP TITLE		☐ DELETE	4.4 CITY - ST - ZIP 5.1 TITLE		Change Addition
1			5.2 NAME	600002529	
NAME Street address			5.3 STREET ADDRESS	60 0002529 -05/19/9801053-	<u>-019</u>
			5.4 DITY-ST-ZIP	***150.00	w
CITY-ST-ZIP TITLE	<u> </u>	☐ DELETE	61 TITLE	The second of th	Change Addition
NAME			62 NAME		10/10
STREET ADDRESS			63 STREET ADDRESS		/ \/ /
CITY-ST-ZIP			64 CHY-ST-ZIP) , j
14. I hereby o	pertify that the information supplied w	ith this filing does not qualify f	or the exemption stated in	Section 119.07(3)(i), Florida Statutes, I furth	ner certify that the information

indicated on this annual report or supplemental annual report is true and accurate and the officer or director of the corporation or the receiver or trustee empowered to execute this Block 12 or Block 13 if changed, or on an attachment with an address. rat my signature shall have the same legal effect as if made under oath; that I am an ♪♪port as required by Chapter 607, Florida Statutes; and that my name appears in

4/1/98