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

PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

Jan 17 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 307845

(8)

FOREST'S MEN'S SHOP, INC.

Principal Place of Business Mailing Address							-{	BIBIT BIBIT BIBIT BIBIT		
1445 FLAGLER BLVD 1			1445 FLAGLER BLVD LAKE PARK FL 33403-2117							
							3. Date Incorporated or Qualified 08/03/1966	3a. Date of La 01/26/19		t
2. Principal Pla 21	ace of Business	2a, Maiiir 26	2a. Mailing Address 26				4. FEI Number 59-1158202	Applied For Not Applicable		
Suite, Apt. i	#, etc.	Suite,	Suite, Apt #, etc				Certificate of Status Desired Section Section			
City & State)	City 8	City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
23 Z ₁ D	Country	28	Zip Count							
24	25 Country	29	·····				8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes			
24	9. Name and Address of Current Registered Agent			1301			10. Name and Address of New Registered Agent			
BEA	TY JR, FOREST C				81	Name				
	FLAGLER BLVD			ļ	62	Ctroot Addr	ess (P.O. Box Number is Not Acceptab	lo)		
	E PARK FL 33403			Ĺ		Street Addre	ess (F.O. box Number is Not Acceptab	····		
					83					
					84	City		FL 85	Zip Code)
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	Stonature: taxest or pointed name of register		0/2	7/ 5			ed when reinstating)	DATE		
12.		B AND DIRECTORS	· · · · · · · · · · · · · · · · · · ·	13.	Ager	nt signature require	ADDITIONS/CHANGES TO OFFIC		TORS IN	12
TITLE	PD DELETE				1 1 TITLE		ABBITIONO/OTTANGEG TO OTTIC	□ Cha		Addition
NAME	BEATY JR, FOREST C			12 NAME						,
STREET ADDRESS	1445 FLAGLER BLVD				3 STREET ADDRESS					
City-St-ZIP	LAKE PARK FL			1.4 CITY-ST-ZIP						
TITLE	VO		DELETE	21 TIT				☐ Cha	nge	Addition
NAME	BEATY, BETSY				2.2 NAME					1
STREET ADDRESS	1445 FLAGLER BLVD				2.3 STREET ADDRESS					
CITY - ST - ZIP	LAKE PARK FL				2 4 CITY - ST - ZIP					
TITLE	ST	DELETE	3.1 T(TLE				☐ Cha	nge 🗀	Addition	
NAME	BEATY, BETSY			3.2 NA	ME	-				Ţ
STREET ADDRESS	1445 FLAGLER BLVD			3.3 STI	REET	ADDRESS				
CITY-ST-ZiP	LAKE PARK FL			3.4. Cl		I - ZIP		——————————————————————————————————————		
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NAME				4. 2 NA						ļ
STREET ADDRESS						AODRESS				
CITY-S1-ZIP			DELETE	4.4 CiT 5.1 TiT		T - ZiP		Cha	000	Addition
TITLE NAME				5.1 III 5.2 NA	_			OIR	90 ∟	7 - 300((0)))
!				1		ADDRESS				ļ
STREET ADDRESS CITY-ST-ZIP				5.4 CII						
TITLE			DELETE	6.1 T(T		. 211		☐ Cha	nge [Addition
NAME				6.2 NA				 -··-	_	
STREET ADDRESS						ADDRESS				
CITY-ST-7/P				6.4 CIT		1				Ì
14 Ldo heret	y certify that the information su	oplied with this film	g does not qua	lify for the	exe	mption stated	in Section 119.07(3)(i), Florida Statute	s. I further certify	that the	- ath. 15 - 1
Lamao of	n indicated on this annual repo ficer or director of the corporat n Block 12 or Block 13 if chang	on or the receiver c	r trustee empo	wered to e	xeci	rate and that ute this repor	my signature shall have the same legat t as required by Chapter 607, Florida S	i effect as if mad tatutes, and that	e under o my name	ain; inat