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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 310665

(5)

KEPP'S MEN'S SHOPS OF FLORIDA, INC.

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FILED

Feb 21 1997 8:00am

Secretary of State

Dringing Place	co of Ruciness	Mailing Address				
Principal Place of Business Mailing Address 3541 MERCANTILE AVENUE 3541 MERCANTILE AVENUE						
NAPLES FL 3		NAPLES FL 34104-3309	•			
				3. Date Incorporated or Qualified 11/01/1966	3a. Date of Last Report 04/17/1996	
2. Principal	Place of Business	2a. Mailing Address	······	4. FEI Number	Applied F	
21		26		59-1151530	Not Applic	
Suite, Apt		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Addition	
City & Sta		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
— Zıp	Country	Zip	Country	8. This corporation has flability for it		
14	[25]		30		Yes No	
	9. Name and Address of Curr	ent Registered Agent	81 Name	10. Name and Address of New Reg	Jistered Agent	
	SSELL JR,JAMES W		oi iyante			
	5 FT CHARLES DR		82 Street Add	dress (P.O. Box Number is Not Acceptab	e)	
NAI	PLES FL 33940		83			
			••			
			84 City		85 Zip Code	
				rporation submits this statement for the pation's board of directors. I hereby accep	FL S EP COOK	
12.		ND DIRECTORS	Registered Agent signature requ	ulred when reinstating) ADDITIONS/CHANGES TO OFFIC		
TITLE	PD	DELETE	1.1 TITLE		☐ Change ☐ Ac	
NAME	RUSSELL JR, JAMES W		1.2 NAME			
STREET ADORESS			1.3 STREET ADDRESS			
CITY-ST-ZIP	NAPLES FL	DELETE	1.4 CiTY-ST-ZIP		☐ Change ☐ Ac	
TILLE	ST RUSSELL,BETSY ANN	["] DEFEIR	2.1 TITLE		En change En Au	
NAME STREET ADDRESS	ACAR ET ALLIGUES DE		22 NAME 23 STREET ADDRESS			
CITY-ST-ZIP	NAPLES FL		2.4 CITY-ST-ZIP	er we		
TOLE	D	☐ DELETE	3.1 TITLE		Change Ac	
NAME	RUSSELL, BETSY ANN		3.2 NAME			
STREET ADDRESS	3005 FT.CHARLES DR.		3.3 STREET ADDRESS		•	
CITY - S1 - ZIP	NAPLES FL		3.4. CITY-ST-ZIP		,	
TITLE		DELETE	4.1 TITLE		☐ Change ☐ Ad	
NAME			4, 2 NAME			
STREET ADDRESS	i		4.3 STREET ADDRESS			
CHY-ST-7IP		DELETE	4.4 CITY - ST - ZIP 5.1 TITLE		Change A	
TITLE		ריין מנינונ		•	<u>ш</u> очапув <u>ш</u> Ас	
NAME. STREET ADDRESS			5.2 NAME 5.3 STREET ADDRESS			
CITY-ST-ZIP	,		5.4 CITY+ST-ZIP			
TITLE		LJ DELETE	61 TITLE		Change A	
NAME		NAME OF THE PERSON OF THE PERS	62 NAME			
STREET ADDRESS	3		6.3 STREET ADDRESS			
CITY-S1-7P			6.4 CITY - ST - ZIP			
44 1 1-1-	all and the state in terms of the			ad to Constant 440 OT/OV/). Floride Chat de-	1.4 -45	

4. Edo hereby certify that the information supplied with his filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes, I further certify that the information indicated by this annual report or supplemental annual repolt 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 virector of the corporation or the received or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 or Block 13 of changed, or on an attachment with an address.
(941) 643-1234

SIGNATURE:

THE AND TYPED OF PRINTED NAME OF SIGNING DEFICER OR DIRECTOR W. RUSSOLL, Jr. 3 FEB '97

CR2E034 (9/96)