

# 2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # 357121

1. Entity Name  
CAVALIER MEN'S WEAR, INC.



Principal Place of Business

9 W FLAGLER STREET  
MIAMI, FL 33130

Mailing Address

18851 NE 29TH AVE.  
900  
AVENTURA, FL 33180

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04112007

Chg-P

CR2E034 (12/06)

4. FEI Number

59-1279536

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

ROTH, LEONARDO A ESQ.  
18851 NE 29TH AVE. STE. 900  
AVENTURA, FL 33180

7. Name and Address of New Registered Agent

Name

FLORIDA ANNUAL REPORT SERVICES, INC.

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

2300 Coral Way, Suite # 200

City

Miami

FL

Zip Code

33145

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

*Leonardo A. Roth*

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

(NOTE: Registered Agent signature required when reinstating)

DATE

Amended AR is \$61.25

9. Election Campaign Financing  
Trust Fund Contribution.

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE DV  
NAME RINCON CESPEDES, GILIA E  
STREET ADDRESS 9 WEST FLAGLER STREET  
CITY-ST-ZIP MIAMI, FL 33130

TITLE TD  
NAME RINCON CESPEDES, GUIDO J  
STREET ADDRESS 9 W FLAGLER STREET  
CITY-ST-ZIP MIAMI, FL 33130

TITLE D  
NAME WASSERSTEIN, JEANATTE R  
STREET ADDRESS 9 WEST FLAGLER ST  
CITY-ST-ZIP MIAMI, FL

TITLE SD  
NAME RINCON CESPEDES, GAMARIEL A  
STREET ADDRESS 9 W FLAGLER STREET  
CITY-ST-ZIP MIAMI, FL 33130

TITLE PD  
NAME CESPEDES DE RICON, GERENALDO V  
STREET ADDRESS 9 W FLAGLER STREET  
CITY-ST-ZIP MIAMI, FL 33130

TITLE D  
NAME RINCON DE RINCON, GLADYS V  
STREET ADDRESS 9 W FLAGLER STREET  
CITY-ST-ZIP MIAMI, FL 33130

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
900103132389  
05/24/07--01013--004 \*\*70.00

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D  
NAME RINCON CESPEDES, GUSTAVO ANTONIO  
STREET ADDRESS 9 West Flagler St  
CITY-ST-ZIP Miami, FL 33130

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE PD  
NAME CESPEDES DE RINCON, GERENALDA V.  
STREET ADDRESS 9 W Flagler Street  
CITY-ST-ZIP Miami, FL 33130

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Gerrenalda de Rincon*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/07

Date

305-379-8784

Daytime Phone #

FILED  
07 MAY 11 AM 9:06

FLORIDA ANNUAL REPORT SERVICES, INC.  
MIAMI, FLORIDA

