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 # 400626

(8)

1 '	ED CLOTHING, INC.			 	######################################
Principal Plac	ce of Business	Marine Address			
i '	BOTH STREET	Mailing Address P O BOX 420009		ŀ	
MIAMI FL 33		MIAMI FL 33242			
US		US		DO NOT WRITE IN TH	IIS SPACE
				3. Date Incorporated or Qualified	
2 Principal F	Place of Business	2a. Mailing Address		05/08/1972	
21	riace of business	<u> </u>		4. FEI Number	Applied For
Suite, Apt.	. #. etc.	Suite, Apt. #, etc.		59-1394756	Not Applicable \$8.75 Additional
22	•	27		5. Certificate of Status Desired	Fee Required
City & Stat	te	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	current ear Intangible
24	9. Name and Address of Currer	29	30	Personal Property Tax due June 30.	DXes □ No
<u>V</u> I		nt negistered Agent	81 Name	10. Name and Address of New Registers	ed Agent
Į.	JPER, JACK 550 N.W. 39TH STREET				
,	IAMI FL 33142		82 Street Add	ress (P.O. Box Number is Not Acceptable)	
• • • • • • • • • • • • • • • • • • •	241111 - 00172		83		
			·		
			84 City	F	85 Zip Code
11. Pursuant	to the provisions of Sections 607.050	02 and 607.1508, Florida Statuti	es, the above-named corp	poration submits this statement for the purpose	e of changing its registered
office or s agent. I a	registered agent, or both, in the State am familiar with, and accept the oblig	e of Florida. Such change was a ations of, Section 607.0505, Flo	authorized by the corporatorida Statutes.	poration submits this statement for the purpose tion's board of directors, I hereby accept the a	appointment as registered
SIGNATURE					
	Signature, typed or printed name of registered age		E: Registered Agent signature requir		
12.	OFFICERS AN	D DIRECTORS	13.	red when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	OFFICERS AN		13. 1.1 TITLE		
TITLE NAME	OFFICERS AN PD KUPER, JACK	D DIRECTORS	13. 1.1 TITLE 1.2 NAME		ND DIRECTORS IN 12
TITLE NAME STREET ADDRESS	OFFICERS AN	D DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS		ND DIRECTORS IN 12
TITLE NAME	OFFICERS AN PD KUPER,JACK 2550 N.W. 39TH STREET	D DIRECTORS	13. 1.1 TITLE 1.2 NAME		AND DIRECTORS IN 12 Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AN PD KUPER,JACK 2550 N.W. 39TH STREET	D DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP		ND DIRECTORS IN 12
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS AN PD KUPER,JACK 2550 N.W. 39TH STREET MIAMI FL V	D DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE		AND DIRECTORS IN 12 Change Addition
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4. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 tustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attacondens with an adoptes.

SIGNATURE:

MANTREQUIRE //

5/98 6384

FILED

Jan 29 1998 8:00am

Secretary of State