FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Saridra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # 408102

1. Corporation Name

(2)

MR. TALL & BIG SHOPS, INC.

Principal Place of Business Mailing Address						ı tabitt bişti Zarê) iğiği tinir geli	10 170 G121 G151 G15		
MR. TALL & BIG MEN'S WEAR 700 E. M.I. CAUSE									
3218 A. E. CO ORLANDO FL	OLONIAL DRIVE	MERRITT IS	SLAND FL 32952				Ta- B-t	- Deposit	
US						3. Date Incorporated or Qualified 09/05/1972 3a. Date of Last Report 05/01/1995			
2. Principal Place	e of Business	2a. Mailing Adi	dress			4. FET Number 59-1445405		Applied For Not Applicable	
Suite, Apt #, etc.		Suite, Apt	Suite, Apt #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State		27 City & Stat	City & State			6. Election Campaign Financing \$5.00 May Be			
23		28				Trust Fund Contribution Added to Fees			
Zip	Country	Zip	j	ountry		B. This corporation has liability for i		ders 199.032,	
24	25 29		[30]			Florida Statutes Yes No 10, Name and Address of New Registered Agent			
	9. Name and Address of Cur	rent Registered Ager	11	81	Name	10, Name and Address of No.		·	
CUADO	DDI ME			82		lress(P.O. Box Number is Not Acceptab	lal		
SHARR, 700 EAS	Bruce It Merritt Island Cause	:WAY			Street Add	ess(P.O. Box Number is Not Acceptable)			
	ST MERRITT ISLAND CAUSE	WAY		83					
MERRIT	r Island fl 32952			84	City		E1 85	Zip Code	
		1007 1503 Flo	Ido Ctot dos dos	trough.	named como	vation submits this statement for the Du	roose of changin	g its registered office	
11. Pursuant to or registered	the provisions of Sections 607.0 d agent, or both, in the State of f	Horida Such change w	as authorized by the Statutes.	ie com	ioration's boa	ration submits this statement for the pul ard of directors. I hereby accept the app	ointment as regis	stered agent. I am	
	, and accept the obligations of S	section 607,0303, Flond	da Statutes.						
SIGNATURE si	gnatine, typed or pristed came of registered.	agent and stord accounting	(NOTE Playist	ered A je	it symatore disput	as when recetaing)	DATE.	ECTODO IN 10	
12.	OFFICERS	AND DIRECTORS	·	<u> 13.</u>	r	ADDITIONS/CHANGES TO OF	FICERS AND DIF		
TUTLE	STD			1 THEF				lange	
NAME	SHARP, NANCY	NE CALICERIAV		2 NAME	L ADDRESS				
STREET ADDRESS	700 EAST MERRIT ISLA MERRITT FL	ND CAUSEITAI		4 O/TY - 1					
CITY - ST - ZIP	D D			TITLE			CI	nange 🔲 Addition	
NAME	FELSOT, GREGG	-		2 NAME					
STHEET ADDRESS	700 EAST MERRITT ISL	AND CAUSEWAY	2	3 STHEE	L ADURESS				
CITY-ST-ZIP	MERRIT ISLAND FL			4 QITY -	ST ZIF			Addition	
TITLE				1 TITLE			□ c	hange 🔲 Addition	
NAME				3 2 NAME					
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CITY - ST - ZIP				1 1 TITLE			C	nange Addition	
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TITLE				5 1 TITLE				nange Addition	
NAME].	5 2 NAMS					
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CHTY-ST-ZIP				5.4 CITY				hanna Addition	
TITLE				6 1 Tifu8			["] (thange	
NAME				6 2 NAME					
STREET ADDRESS				6.3 STHE	ET ADDRESS				

CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 trustee 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 attachment with an address.

SIGNATURE:

Many That I NAME OF SIGNING OFFICER OF DIRECTOR

4-29-96

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407-459-1007

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