


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

FILED
Jul 16 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 428306

1. Corporation Name

Metropolitan Dancewear Mfg. Co. Inc.

Principal Place of Business

733 W. 26th Street
Hialeah, FL 33010

Mailing Address

Same

3. Date incorporated or Qualified

6/14/73

3a. Date of Last Report

4/5/96

2. Principal Place of Business

21 Suite, Apt. #, etc

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

4. FEI Number

59-1469673

Applied for

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

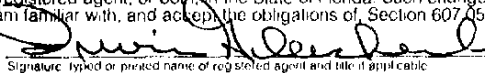
Betty Schifter
1865 No. Bay 79 Street, Causeway
Miami, FL 33141

10. Name and Address of New Registered Agent

81 Name
Irwin Gleichenhaus
82 Street Address (P.O. Box Number is Not Acceptable)
733 W. 26th Street
83
84 City
Hialeah FL 85 Zip Code
33010

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



Irwin Gleichenhaus

Signature typed or printed name of registered agent and file if applicable

(NOTE: Registered Agent Signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE P
NAME Paul Schifter
STREET ADDRESS 1865 No. Bay 79 Street
CITY-ST-ZIP Miami, FL 33141

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE P/T/S/D ☒ Change ☐ Addition

12 NAME Irwin Gleichenhaus

13 STREET ADDRESS 20185 E. Country Club Drive

14 CITY-ST-ZIP Aventura, FL 33180

21 TITLE ☐ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP ☐ Change ☐ Addition

31 TITLE ☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP ☐ Change ☐ Addition

41 TITLE ☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP ☐ Change ☐ Addition

51 TITLE ☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP ☐ Change ☐ Addition

61 TITLE ☐ Change ☐ Addition

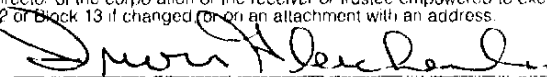
62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP ☐ Change ☐ Addition

14. I do 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 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:



SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

(305) 863-0103

CR2E034 (9/96)