

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

FILED
May 13 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 43304 (3)
1. Corporation Name
FAY POTTER UNDERFASHIONS, INC

Principal Place of Business: 95-31 HARDING AVE SURFSIDE, FL 33154-2501
Mailing Address: 95-31 HARDING AVE SURFSIDE, FL 33154-2501

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21		26	625 MIDDLE NECK RD	08/17/1973	
Suite, Apt #, etc		Suite, Apt #, etc.		4. FEI Number	
22		40 GEWIRTZ FCO, INC		59-1487192	
City & State		City & State		Applied For	
23		GREAT NECK NY		Not Applicable	
24	Zip	29	11023	5. Certificate of Status Desired	
25	Country	30	USA	<input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution	
				<input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	
				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent
LONGO, ROSANN
95-31 HARDING AVE
SURFSIDE, FL 33154-2501

10. Name and Address of New Registered Agent

81	Name	FERRARA, LINDA
82	Street Address (P.O. Box Number is Not Acceptable)	95-31 HARDING AVE
83		
84	City	SURFSIDE
85	Zip Code	FL 33154-2501

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: *Linda Ferrara* DATE: 4/27/98

12. OFFICERS AND DIRECTORS

TITLE	C/P/T/S	<input type="checkbox"/> DELETE
NAME	GEWIRTZ, ARNOLD	
STREET ADDRESS	95-31 HARDING AVE	
CITY-ST-ZIP	SURFSIDE, FL 33154-2501	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY-ST-ZIP	

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***158.75

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 registered 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 (in an alternate block) with an address.

SIGNATURE: *Arnold Gewirtz* ARNOLD GEWIRTZ 4/27/98 516-466-0533

CR2E034 (10/97)