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Apr 15 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 449633

(7)

1. Corporation Name

J & P SPORTWEAR INC.

Principal Place of Business

175 N.E. 1ST ST.
MIAMI FL 33132

Mailing Address

175 N.E. 1ST ST.
MIAMI FL 33132-2501



3. Date Incorporated or Qualified
04/02/1974

3a. Date of Last Report
05/01/1996

4. FEI Number
59-1535487

Applied For
Not Applicable

6. 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

10. Name and Address of New Registered Agent

ABUT, JOSE
175 N.E. 1ST ST
MIAMI, FL
33132

81 Name

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

83

84 City

FL 85 Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME ABUT, JOSE
STREET ADDRESS 2210 S.W. 28TH ST.
CITY-ST-ZIP MIAMI FL

11 TITLE
12 NAME ☐ Change ☐ Addition

TITLE TSD
NAME ABUT, HENRY
STREET ADDRESS 2210 S W 28TH ST
CITY-ST-ZIP MIAMI FL

13 STREET ADDRESS
14 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

21 TITLE
22 NAME ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

23 STREET ADDRESS
24 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

31 TITLE
32 NAME ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

33 STREET ADDRESS
34 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 #

4/5/97 (305) 531-5816

CR2E034 (9/96)