

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

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Jan 26, 1999 8:00am  
Secretary of State

01-26-1999 90025 031 \*\*\*150.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 573321

1. Corporation Name  
MOSTLY MEN FASHIONS, INC.

Principal Place of Business  
520 10TH ST.  
P.O. BOX 510593  
KEY COLONY BEACH FL 33051-7593

Mailing Address  
520 10TH ST.  
P.O. BOX 510593  
KEY COLONY BEACH FL 33051-7593

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/23/1978

4. FEI Number

59-1824514

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 owes the current year Intangible  
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

Country

29 Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FERGUSON, RONALD J.  
520 10TH ST.  
P.O. BOX 510593  
KEY COLONY BCH FL 33051-7593

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 ☐ DELETE

NAME FERGUSON, RONALD J  
STREET ADDRESS 520 10TH ST.  
CITY-ST-ZIP KEY COLONY BCH FL

1.1 TITLE ☐ Change ☐ Addition

TITLE STD ☐ DELETE

NAME FERGUSON, MARGARET  
STREET ADDRESS 520 10TH ST.  
CITY-ST-ZIP KEY COLONY BCH FL

2.1 TITLE ☐ Change ☐ Addition

TITLE VD ☐ DELETE

NAME FERGUSON, LEE C.  
STREET ADDRESS 22914 W. NEWBERRY ROAD  
CITY-ST-ZIP NEWBERRY FL

3.1 TITLE ☐ Change ☐ Addition

TITLE VD ☐ DELETE

NAME EVANS, CARLIE  
STREET ADDRESS 22914 W NEWBERRY ROAD  
CITY-ST-ZIP NEWBERRY FL

4.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. 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 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/6/98

305 743 5657

CR2E034 (11/98)