2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 843036

Entity Name: MITCHELL'S FORMAL WEAR, INC.

FILED Apr 26, 2007 Secretary of State

1835 SHACKLEFORD CT NORCROSS, GA 30093 US

Current Mailing Address: New Mailing Address:

1835 SHACKLEFORD CT 5803 GLENMONT DRIVE NORCROSS, GA 30093 US HOUSTON, TX 77081 US

FEI Number: 58-0947890 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324 U

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 CEOP () Delete
 Title:
 CEO (X) Change () Addition

 Name:
 HUTH, ROBERT D
 Name:
 ZIMMER, GEORGE

Address: 1001 WASHINGTON AVE. Address: 40650 ENCYCLOPEDIA CIRCLE

City-St-Zip: CONSHOHOCKEN, PA 19428 City-St-Zip: FREMONT, CA 94538

Title: VCFO () Delete Title: VCFO (X) Change () Addition Name: WALKER, GARY F Name: DAVIS, NEILL P

 Address:
 1835 SHACKLEFORD CT
 Address:
 5803 GLENMONT DRIVE

 City-St-Zip:
 NORCROSS, GA 30093
 City-St-Zip:
 HOUSTON, TX 77081

Title: (X) Change () Addition Title: () Delete DOERR, MARTIN M BRESLER, PHD, CHARLES Name: Name: 611 OLIVE STREET 5803 GLENMONT DRIVE Address: Address: City-St-Zip: SAINT LOUIS, MO 63101 City-St-Zip: HOUSTON, TX 77081

Title: VP () Delete Title: VPAS (X) Change () Addition Name: FINGLETON, THOMAS D Name: PRUITT, CLAUDIA A

 Name
 FROTT, CLAODIA A

 Address:
 611 OLIVE ST.
 Address:
 5803 GLENMONT DRIVE

 City-St-Zip:
 SAINT LOUIS, MO 63101
 City-St-Zip:
 HOUSTON, TX 77081

Title: VPS () Delete Title: VPT (X) Change () Addition

 Name:
 BRICKSON, RICHARD A
 Name:
 WILSON, DIANA M

 Address:
 611 OLIVE ST.
 Address:
 5803 GLENMONT DRIVE

 City-St-Zip:
 SAINT LOUIS, MO 63101
 City-St-Zip:
 HOUSTON, TX 77081

Title: () Delete Title: (X) Change () Addition SZAMES, BRIAN M CONLON, MICHAEL W Name: Name: 7 WEST SEVENTH STREET 1301 MCKINNEY, SUITE 5100 Address: Address: City-St-Zip: CINCINNATI, OH 45202 City-St-Zip: HOUSTON, TX 77010

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CLAUDIA A PRUITT VPAS 04/26/2007