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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F18590

(2)

CAN DO FASHIONS, INC.

Mailing Address

2a. Mailing Address

City & State

Suite, Apt. #, etc.

26

27

28

2963 44TH AVENUE N. ST. PETERSBURG FL 33714

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Principal Place of Business

2963 44TH AVENUE N. ST. PETERSBURG FL 33714

FILED Jan 20 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable

3. Date Incorporated or Qualified

01/28/1981

59-2105209

5. Certificate of Status Desired

Trust Fund Contribution

Election Campaign Financing

4. FEI Number

| Zip | Country | <i>Z</i> ₁ p | | Country | ry | | 8. This corporation owes or has paid the current year Intangible | | | |
|---|----------------------------------|-----------------------------|-------------------|--------------------------|--|--------------|--|---------------------------------------|-------------|-----------------|
| 24 | 25 | | |) | | | Personal Property Tax due June 30. 💢 Yes 🔲 No | | | |
| Name and Address of Current Registered Agent 10. Name and Address of New | | | | | | | | | gent | |
| FLI | etcher, david c | | | 81 | Name |) | | | | |
| 2963 44TH AVENUE NORTH ST. PETERSBURG FL 33714 | | | | | Street Address (P.O. Box Number is Not Acceptable) | | | | | |
| | | | | | 83 | | | | | |
| | | | | | 3 | | | | | |
| | | | | 84 | City | | | FL | 85 Z | ip 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 praited name of importance agent and tide if applicable (NOT): Registered Agent signature required when relasting) DATE | | | | | | | | | | |
| 12. | | RS AND DIRECTORS | (NOTE: R | 13. | ant signatu | re requied i | when reinstalling) ADDITIONS/CHANGES T | | DIDECT | ODC IN 12 |
| TITLE | | CS DELETE | | 1.1 TITLE | | Т | ADDITIONS/CHANGES I | O OFFICE. NO AND | Chang | |
| NAME | FLETCHER, DAVID C | | | 1.2 NAME | | | | | | |
| STREET ADDRESS | 2963 44TH AVENUE NORTH | | | 1.3 STREET ADDRESS | | | | | | |
| CITY-ST-ZIP | ST. PETERSBURG FL | | | 1.4 CITY - S | 31 - 71P | 1 | | | | 13 |
| TITLE | VP | | DELETE | 21 HILE | | 1 | ······································ | | Chang | e Addition |
| NAME | FLETCHER, CINDY | | | 2.2 NAME | | | | | | |
| STREET ADDRESS | 2963 44TH AVENUE N | | | 2.3 STREET | ADDRESS | | | | | [|
| CITY-ST-ZIP | ST. PETERSBURG FL | | | 2. 4 C(1Y- | ST-ZIP | | | | | |
| TITLE | | | DELETE | 3.1 TITL₹ | | } | | | Chang | e 🔲 Addition |
| NAME | | | | 3.2 NAME | | 1 | | | | |
| STREET ADDRESS | | | | 3 3 STREET | ADDRESS | 1 | | | | Ì |
| CITY-ST-ZIP | | | | 3 4. CrTY - 9 | 51 - ZIP | | | | | |
| TITLE | | L | DELETE | 4.1 TITLE | | | | | Chang | e L Addition |
| NAME | | | | 4. 2 NAME | | ļ | | | | l |
| STREET ADDRESS | | | | 4.3 STREET | ADDRESS | - | | | | ĺ |
| CITY - ST - ZIF | | | DELETE | 4.4 CITY - S | 1 - 7IP | 4 | | · · · · · · · · · · · · · · · · · · · | Chann | Addition |
| TITLE | | L. | 1 DELETE | 5 1 TITLE | | 1 | | l | Chang | je 🔲 Addition |
| NAME | | | | 5.2 NAME | | 1 | | | | į |
| STREET ADDRESS | | | | 5.3 STREET | | | | | | |
| CITY-ST-ZIP TITLE | | - | DECETE | 5.4 CHTY - S 6.1 THLE | I - ZIP | | | | Chang | e Addition |
| NAME | | L | J OECCIE | 6.2 NAME | | 1 | | | | E D'AGOIDAT |
| - 1 | | | | | ADDOCCO | 1 | | | | ì |
| STREET ADDALSS | | | | 63 STREET | | | | | | |
| 14. I hereby o | certify that the information sun | plied with this filing does | not qualify for t | 64011Y-S he exemp | | Lod in So | ection 119.07(3)(i). Florida Sta | atutos. I further cer | lify that t | the information |
| 14. Thereby 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 of supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath, 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. | | | | | | | | | | |