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

**PROFIT** CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F90894

MARIBLANCA FASHIONS, INC.

Mailing Address

(9)

## **FILED** Feb 21 1997 8:00am Secretary of State

% MARIBLANCA BRITO 288 W 21 ST HIALEAH FL 33010		% MARIBLANCA BRITO 266 W 21 ST HIALEAH FL 33010-2517		3. Date Incorporated or Qualified 07/15/1982	3a. Date of L 05/01/19			
9 Dringing U	lace of Business	2a. Mailing Address			4. FEI Number	1 00/01/10	Applied For	
	Tace of Dustriess	<sub>1</sub>	——————————————————————————————————————		59-2204805	<del> </del>	Not Applicable	
21		26			38-2204003			
Suite. Apt. # etc.		Suite, Apt. #, etc.	27		5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & Stat	le	City & State			Election Campaign Financing Trust Fund Contribution		.00 May Be	
Zip	Country	Zip	Count	ry	8. This corporation has liability for	intanoible tax un	der s. 199.032.	
24	25	29	30			Yes No		
	9. Name and Address of C				10. Name and Address of New Re	gistered Agent		
RRIT	TO, MARIBLANCA		8	1 Name				
206 WEST 21ST STREET			8	2 Street Add	Address (P.O. Box Number is Not Acceptable)			
HIAI	LEAH FL		8	3		<del></del>		
			8	4 City		FL 85	Zip Code	
		of prog d cord (rep. Florida Prod 4)			poration submits this statement for the p		sing its registered	
office or i	registered agent, or both, in the	e State of Florida. Such change was a colligations of, Section 607.0505, Florida.	uthorized	by the corpora	ation's board of directors. I hereby acce	pt the appointme	nt as registered	
SIGNATURE	Signature, typed or printed name of regist	contagers and the deminable (NOTE	Registered A	nent signature regu	uired when reinstating)	DATE		
12.		AS AND DIRECTORS	13.	Box 1 of total o and	ADDITIONS/CHANGES TO OFFI		CTORS IN 12	
TITLE	PD	DELETE	1.1 TITLE			☐ Ch	ange Addition	
NAME	BRITO, MARIBLANCA		1.2 NAM	1			-	
	266 W. 21ST STREET			ET ADDRESS				
STREET ADORESS	HIALEAH FL					-	•	
City-ST-ZIP	VD	DELETE	1.4 CITY 2.1 TITLE			Ch	nange Addition	
TITLE	BRITO, ALEXIS		2.2 NAM				ange Laire	
NAME	266 W 21ST STREET							
STREET ADDRESS	HIALEAH FL		1	ET ADDRESS	+ <sub>1</sub> ,			
CITY-S1-7IP		DELETE		(-ST-ZIP		☐ Ch	nange	
THILE	TD POTTO FONIESTO	L_I DELETE	3.1 TITL				anga Li Audinon	
NAME	BRITO, ERNESTO		3.2 NAM					
STREET ADDRESS	266 W. 21ST STREET			ET ADDRESS				
CITY-ST-76P	HIALEAH FL			r-ST-ZIP	<u></u>		A Jaken	
TOLE		DELETE	4.1 TITL			LJ Ch	nange	
NAME			4. 2 NAN	AE				
STREET ADDRESS			4.3 STR	ET ADORESS				
CITY - S1 - ZIF				-ST-ZIP				
TITLE		DELETE	5.1 TITL	E		☐ Cr	nange Addition	
NAME			5.2 NAM	E				
STREET ADDRESS			5.3 STR	EET ADDRESS				
CITY - \$1 - ZIP			5.4 CITY	-ST-ZP				
THLE		DELETE	6.1 TITL			□ CI	hange Addition	
NAME			6.2 NAM	IE		•		
STHEET ADDRESS				EET AODRESS				
City St-7iP			•	-ST-ZIP				
GILL OF THE					· ·			

14. I do hereby certify that the information supplied with this filling 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 supplymental 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 of 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 or Block 14 or Block 15 or Block 15 or Block 15 or Block 16 or Block 16 or Block 16 or Block 17 or Block 17 or Block 18 or Block 18 or Block 18 or Block 19 or Blo

**SIGNATURE:** 

30V-884-0721