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

**FILED** May 01 1998 8:00am **PROFIT** ELORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS **DOCUMENT #**1. Corporation Name F94000004355 (3) THE IZOD GANT CORPORATION **Principal Place of Business** Mailing Address 1290 AVENUE OF THE AMERICAS 1290 AVENUE OF THE AMERICAS NEW YORK NY 10104 NEW YORK NY 10104 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/17/1994 2. Principal Place of Business 2a. Mailing Address 4. FEI Numbe Applied For Not Applicable 21 26 23-2069566 Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 26 Zip Zip Country Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. XYes No Personal Property Tax due June 30. 25 30 24 29 9. Name and Address of Current Registered Agent Name and Address of New Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS ST. Street Address (P.O. Box Number is Not Acceptable) TALLAHASSEE FL 32301 83 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, typod or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating CR2E034 (10/97 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE 1.1 TITLE Addition TITLE Change RUSSO, ALLAIN NAME 1.2 NAME 404 FIFTH AVENUE STREET ADDRESS 1.3 STREET ADDRESS **NEW YORK NY 10018** CITY - ST - ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE ALLAN, JOHN M JR NAME 2.2 NAME 1290 AVENUE OF THE AMERICAS STREET ADORESS 2 3 STREET ADDRESS **NEW YORK NY** CITY-ST-ZIP 2 4 CITY-ST-ZIP Change VISD DELETE ☐ Addition TITLE HOOTKIN, PAMELA N 47 vestry St., SN 85 EAST END AVE. STREET ADDRESS 3.3 STREET ADDRESS **NEW YORK NY 10128** 3.4. CITY-ST-ZIP New York, Ny 10013 CITY-ST-2IP DELETE Addition TITLE 4.1 TITLE WINTER, IRWIN W 4 2 NAME NAME 1075 PARK AVE. STREET ADORESS 4.3 STREET ADDRESS **NEW YORK NY 10128** 4.4 CITY - ST- ZIP CITY-ST-ZIP DELETE 5.1 TITLE Change ☐ Addition CHIRICO, EMANUEL NAME 5 2 NAME 44 RIDGEWOOD AVE. STREET ADDRESS 53 STREET ADDRESS YONKERS NY 10704 CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 61 TITLE WASSERMAN, EVAN H NAME 6.2 NAME

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.

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

10 MALLARD COURT

ENGLEWOOD NJ 07631

d madellandania

4/20/98

212-468-7290