

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

PROFIT
CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JUN 14 10:37

DOCUMENT # G43278

(2)

1. Corporation Name

T&N SHIRT COMPANY

Principal Place of Business

Mailing Address

% ANTHONY SALINARDI
2131 NE 208TH STREET
NORTH MIAMI BEACH FL 33179

% ANTHONY SALINARDI
2131 NE 208TH STREET
NORTH MIAMI BEACH FL 33179

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/08/1983

3a. Date of Last Report

04/18/1994

4. FEI Number

59-2298533

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Finance and
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.033,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

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30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SALINARDI, ANTHONY
2131 NE 208TH ST
MIAMI FL 33179

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. ADDITIONAL CHANGES TO THE OFFICERS AND DIRECTORS

11

NAME

D

SALINARDI, ANTHONY

STREET ADDRESS

2131 NE 208TH ST

CITY ST ZIP

N. MIAMI BCH FL

12

NAME

PD

SALINARDI, JOAN

STREET ADDRESS

2131 NE 208TH ST.

CITY ST ZIP

N. MIAMI BEACH FL

13

NAME

V

BRAUN, MICHAEL

STREET ADDRESS

2131 N.W. 208TH STREET

CITY ST ZIP

N. MIAMI BEACH FL

14

NAME

STREET ADDRESS

CITY ST ZIP

15

NAME

STREET ADDRESS

CITY ST ZIP

16

NAME

STREET ADDRESS

CITY ST ZIP

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY ST ZIP

21 TITLE

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64 CITY ST ZIP

☐ Change ☐ Addition

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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 in an attachment with an address.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/4/95 365 885 6115