## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 16, 2004 08:00 AM Secretary of State

ANNUAL REPURI				C4 CC4-4-	
DOCUMENT # H73784  1. Enlity Name JUST SHIRTS, WESTLAND, INC.				Secretary of State	
Principal Plac	e of Business	Mailing Address			
146 HANSE		146 HANSE AVENUE			
FREEPORT,	NY 1152U	FREEPORT, NY 11520			
_				04072004 No Chg-P CR2E034 (10/03)	
DO NOT WRITE IN THIS SPAC			CE	4. FEI Number Applied For	
				58-1697862 Not Applicable	
				5. Certificate of Status Desired \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent					
UNITED STATES CORPORATION COMPANY					
1201 HAYS STREET				DO NOT WRITE	
SUITE 105 TALLAHASSEE, FL 32301				IN THIS SPACE	
IALLADA	33EE, FE 32301			III IIIO OI AOL	
8. 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. I am familiar with, and accept					
the obligations of registered agent.					
SIGNATURE Signature, typed or printed name of registered eigent and title if applicable. (NOTE, Registered Agent signature required when reinstating)  DATE					
FILE NOWIII FEE IS \$150.00  After May 1, 2004 Fee will be \$550.00  9. Election Campaign Financ Trust Fund Contribution.				U0000115563 i.00 May Be 04/16/04-80029-010 150.00	
10. OFFICERS AND DIRECTORS					
TITLE	P	•	1		
NAME STREET ADDRESS	COHEN, ALAN R 12 SCARBOROUGH				
CITY-ST-ZIP	SMITHTOWN, NY 11787				
TITLE	S		1		
NAME	LUBEL, RONALD				
STREET ADDRESS CITY-ST-ZIP	25 ARLINGTON COURT ROSLYN, NY 11576				
TITLE			1		
NAME					
STREET ADDRESS	***************************************			DO NOT WRITE	
CHY-\$T-ZIP		, em.			
NAME				IN THIS SPACE	
STREET ADDRESS					
CITY -ST - ZIP					
TITLE NAME					
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NAME STREET ADDRESS					
CITY-ST-ZIP					
12. I 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 report of a purplemental secret is two and accurate and that my signature that the information and that my signature that the information and that my signature that the information are purplemental secret is two and accurate and that my signature that the information are purplemental secret in the secret is the secret in					
indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					