

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H98111

FILED  
Jan 13, 2007  
Secretary of State

Entity Name: RICH FORMAL WEAR, INC.

## Current Principal Place of Business:

% MICHAEL SCHIFFRIN, ESQ.  
1700 NORTH STATE RD. 7  
HOLLYWOOD, FL 33021

## New Principal Place of Business:

1700 NORTH STATE RD 7  
HOLLYWOOD, FL 33021

## Current Mailing Address:

% MICHAEL SCHIFFRIN, ESQ.  
1700 NORTH STATE RD. 7  
HOLLYWOOD, FL 33021

## New Mailing Address:

1700 NORTH STATE ROAD 7  
HOLLYWOOD, FL 33021

FEI Number: 59-2643030

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

JACOBS, RITCHIE  
1700 N SR 7  
HOLLYWOOD, FL 33021 US

## Name and Address of New Registered Agent:

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: JACOBS, RITCHIE,  
Address: 12305 PASEO WAY  
City-St-Zip: COOPER CITY, FL

Title: VP ( ) Delete  
Name: JACOBS, BERNARD,  
Address: 7119 S.W. 26TH COURT  
City-St-Zip: DAVIE, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RITCHIE JACOBS

P

01/13/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date