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PROFIT CORPORATION **ANNUAL REPORT** 

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(6)

| 1 & SEXY, INC.   |   |   |   |  |   |
|--|---|---|---|--|---|
| e of Business  | Mailing Address   |   | <del></del>   | -  | ANANI DIDIN BIBIK DEBIK IDDI  |
| HOLESALE<br>). ST.   | C/O M.Z. WHOLESALE<br>721 W. B3RD. ST.  |   |   |  |   |
| 33014  | HIALEAH FL 33014  | HIALEAH FL 33014  |   | DO NOT WRITE IN THIS SPACE   |   |
|  |   |   |   |  |   |
| lane of Rusingse   | 2. Mailing Addross  |   |   | 10/2//198/   | Applied For   |
| lace of Dosirioss  | <del>-</del>  |   |   |  | Not Applicable  |
| #. etc.  |   | ·   |   |  | \$8.75 Additional   |
|  | <u>⊢</u> ¬ ' ' '  |   |   | 5. Certificate of Status Desired   | Fee Required  |
| 0  | City & State  | <del>.</del>  |   | 6. Election Campaign Financing   | \$5.00 May Be   |
|  | 28  |   |   | Trust Fund Contribution  | Added to Fees   |
| Country  | Zip   | Country   |   | 8. This corporation owes or has paid the curre   | ent year Intangible   |
| 25   | 29  | 30  |   |  | Yes No  |
| g, Name and Address of Cur   | rrent Registered Agent  |   |   | 10. Name and Address of New Registered A   | gent  |
| AL <b>ab</b> i, Zenat  |   | 81  | Name  |  |   |
| 21 W. 83RD. ST.  |   | 82  | Street Addre  | ess (P.O. Box Number is Not Acceptable)  | <del>- ''- ' </del>   |
| ALEAH FL 33014   |   | J <u>-</u>  |   |  |   |
|  |   | 83  |   |  |   |
|  |   | 84  | City  |  | 85 Zip Code   |
|  | · · · · · · · · · · · · · · · · · · ·   |   | <u> </u>  |  |   |
| to the provisions of Sections 607.0 realstered agent, or both, in the St   | 0502 and 607.1508, Florida Statu<br>Iale of Florida, Such change was  | utes, the above-<br>authorized by t   | -named corpo  | oration submits this statement for the purpose of con's board of directors. I bereby accept the appo     | changing its registered introduced  |
|  |   |   |   |  |   |
| am familiar with, and accept the ob  | oligations of, Section 607.0505, F  | lorida Statutes.  | the corporation   | on a board of directors, thorough decopt ine appe  |   |
|  |   |   |   |  |   |
| Signature, typed or punted name of registered  | 1 agont and to elit applicable (NC  | IE Registered Agent   |   | d when reinstating) DATE   |   |
| Signature, typed or punted name of registered OFFICERS.  |   | 13.   |   |  |   |
| Signature, typed or pointed harne of registered OFFICERS   | t agont and to elit applicable (NC<br>AND DIRECTORS   | IE Registered Agent   |   | d when reinstating) DATE   | DIRECTORS IN 12   |
| Signature, typed or pointed frame of registered OFFICERS  DP HALABI, ZENAT   | t agont and to elit applicable (NC<br>AND DIRECTORS   | 13. 1.1 TITLE 1.2 NAME  | if signature required   | d when reinstating) DATE   | DIRECTORS IN 12   |
| Signature, typed or printed harve of registered OFFICERS.  DP HALABI, ZENAT 721 W. 83RD. ST.   | t agont and to elit applicable (NC<br>AND DIRECTORS   | 13. 1.1 TIFLE 1.2 NAME 1.3 STREET A   | it signature required   | d when reinstating) DATE   | DIRECTORS IN 12   |
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|  | e of Business  +OLESALE 1, ST. 33014  lace of Business  #, etc.  9  Country 25  9, Name and Address of Cur NLABI, ZENAT 1 W. 83RD. ST. ALEAH FL 33014 | Holesale St.  | Mailing Address  C/O M.Z. WHOLESALE 721 W. 93RD. ST. 73014  Page of Business  2a. Mailing Address 2b.  Mailing Address 2c.  Suite, Apt. #, etc. 2c.  2r.  City & State 2c.  Country 2c.  p. Name and Address of Current Registered Agent  NABI, ZENAT 1 W. 83RD. ST.  ALEAH FL 33014  R3  84 | Mailing Address  **C/O M.Z. WHOLESALE 721 W. 83RD. ST. 733014  **Lace of Business    2e. Mailing Address | # of Business  **Mailing Address  **C/O M.Z. WHOLESALE  |

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 trusted 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.

**FILED** 

May 06 1998 8:00am

Secretary of State