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PROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT # K19084 (8)  I. Corporation Name  IVA SPORTSWEAR, INC.						
Principal Place	of Business	Mailing Address			I OISA GIDII DIDII BADI	I OFOIA OIFFA DAOIA IOOF
7085 N.W. 50TH ST. Miami Fl. 33166		7085 N.W. 50TH ST. MIAMI FL 33166				
				3. Date Incorporated or Qualified 03/22/1988	3a. Date of La	ast Report <b>'/1995</b>
2. Principal Pla	ace of Business	2a. Mailing Address		4. FEI Number	1 01/11	Applied For
1		26		65-0049250		Not Applicable
Suite, Apt. /	#, etc.	Suite, Apt #, etc.		5. Certificate of Status Desired	1 1	3.75 Additional Fee Required
City & State	;	Oity & State		Election Campaign Financing     Trust Fund Contribution		5.00 May Be Added to Fees
Ζφ 4	Country 25	Ζιρ <b>29</b>	Country	8. This corporation has liability for Florida Statutes		
<u>'                                    </u>	9. Name and Address of Cur			10. Name and Address of New F		it
			81 Name			
SUTTON, JAMERSON & MULLIN			82 Street Ac	ldress (P.O. Box Number is Not Acceptat	ole)	
	JEUNE RD		83			
PENTHO			83			
CORAL	GABLES FL 33134		84 City		E1 65	Zip Code
or register familiar wit	to the provisions of Sections 607.0 ad agent, or both, in the State of F th, and accept the obligations of, S	llorida. Such change was authori	ized by the colporation's be	poration submits this statement for the purporal of directors. Thereby accept the appraical of directors.	irpose of changing pointment as regis	g its registered office itered agent. I am
or register familiar wit SIGNATURE	ed agent, or both, in the State of Fi th, and accept the obligations of, S Sgralure typed or bed size of legisters a	lorida Such change was author section 607 0505, Florida Statute ignitian (For apphare)  AND DIRECTORS	ized by the colporation's be is the Register (Aports y Assense 13.	paid of directors. Thereby accept the app	DATE  DERS AND DIRE	ECTORS IN 12
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certify that the information indicated on this amount report or supplemental annual report is frue 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 tim an attachment with an address 14-25-96 SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR SIGNATURE: V

V305-477-6280 Doylers Proces