

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # K88422 (6)

1. Corporation Name

A & M SPORTSWEAR, INC.

Principal Place of Business

**4115 NW 132 ST
BAY J-K
OPA LOCKA FL 33054**

Mailing Address

**4115 NW 132 ST
BAY J-K
OPA LOCKA FL 33054**



2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

**MOSLI, ANNE
3700 SW 130 AVE
#30
MIRAMAR FL 33160**

3. Date Incorporated or Qualified

05/15/1989

3a. Date of Last Report

03/15/1995

4. FEI Number

65-0123504

Applied For
Not Applicable

5. Certificate of Status Desired

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes. ☒ Yes ☐ No

10. Name and Address of New Registered Agent

81. Name

ANNE MOSLI

82. Street Address (P.O. Box Number is Not Acceptable)

2110 NE 124TH ST

83

84

NORTH MIAMI

FL

85

33181

11. Pursuant to the provisions of Sections 607.06(2) and 607.15(9), 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 607.06(9), Florida Statutes.

SIGNATURE

Signature of Registered Agent or Director

Signature of Registered Agent or Director

Date

12. OFFICERS AND DIRECTORS

TITLE	VS	☐ DELETE
NAME	MOSLI, ANNE	
STREET ADDRESS	3700 SW 130 AVE #30	
CITY, ST, ZIP	MIRAMAR FL 33160	
TITLE	PT	☐ DELETE
NAME	MOSLI, MOSHE	
STREET ADDRESS	3700 SW 130 AVE #30	
CITY, ST, ZIP	MIRAMAR FL 33160	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		☐ Change ☐ Addition
1. TITLE	VS	
2. NAME	ANNE MOSLI	
3. STREET ADDRESS	2110 NE 124TH ST	
4. CITY, ST, ZIP	N. MIAMI, FL 33181	
5. TITLE	PT	☐ Change ☐ Addition
6. NAME	MOSHE MOSLI	
7. STREET ADDRESS	2110 NE 124TH ST	
8. CITY, ST, ZIP	N. MIAMI, FL 33181	
9. TITLE		☐ Change ☐ Addition
10. NAME		
11. STREET ADDRESS		
12. CITY, ST, ZIP		
13. TITLE		☐ Change ☐ Addition
14. NAME		
15. STREET ADDRESS		
16. CITY, ST, ZIP		
17. TITLE		☐ Change ☐ Addition
18. NAME		
19. STREET ADDRESS		
20. CITY, ST, ZIP		

14. I do hereby certify that the information supplied with this filing is true and correct and does not qualify for the exemption stated in Section 119.07(4)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplied in an 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 insured or licensed agent or broker or registered agent as provided for in Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if change I, or on an attachment with an address.

SIGNATURE:

ANNE MOSLI
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/8/96 305-685-1957
TELEPHONE NUMBER

CR2E034 (12/95)