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PROFIT CORPORATION ANNUAL REPORT 1999

DOCUMENT #

1. Corporation Name



L01126

INTERCONTINENTAL USED CLOTHING CORP.

FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

Katherine Harris

Apr 20, 1999 8:00 am Secretary of State 04-20-1999 90005 008 ***150.00



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e of Business	Mailing Address			i imailmit att matat tiam tiant sinte atot arott	W-811 BIBIT BIBIT B	1811 81917 1881	
T 7-4268	82 NE 26 ST Miami FL 33137 US	MIAMI FL 33137		DO NOT WRITE IN THIS SPACE			
	••			3. Date Incorporated or Qualifed			
				07/10/1989			
lace of Business	2a. Mailing Address	_		4. FEI Number	Арі	olied For	
	26			65-0125206	Not	Applicable	
#, etc	Suite, Apt. #, etc	-		_			ئة
	27			3. Certificate of Status Desired	Fee Re	quired	
e : .	City & State			6. Election Campaign Financing			
<u> </u>	28			Trust Fund Contribution	Added to	Fees	
Country	Zip		intry	8. This corporation owes the current year Ir			
	29	30		Personal Property Tax.		<u>U</u> No	
9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Registered	Agent		
AEZ ALTACDACIA			81 Name				
	,		82 Street Addi	ress (P.O. Box Number is Not Acceptable)			
					- 1		
MI FL 33125			83				
•			84 City		85 Zip C	ode	
edistered agent or both in the State	of Florida. Such change was au	uthonzed	i by the corporate	ooration submits this statement for the purpose consisted of directors. I hereby accept the appoint	of changing its pintment as rec	registered gistered	
•							
			Agent signature require		ND DIRECTO	RS IN 12	É
			- T	ADDITIONS/CHANGES TO OFFICERS A			
·=· · · -							
I							6
			TREET ADDRESS				
		1	I				1
MIAMI FL 33125		1.4 CI	TY-ST-ZIP		Change	☐ Addition	1
MIAMI FL 33125	☐ DELETE	1.4 CI 2.1 TII	TY-ST-ZIP		Change	Addition	1
MIAMI FL 33125	☐ DELETE	1.4 CI 2.1 TII 2.2 N	TY-ST-ZIP TLE		Change	Addition	1
MIAMI FL 33125	☐ DELETE	1.4 CF 2.1 TH 2.2 NA 2.3 ST	TY-ST-ZIP TLE AME TREET ADDRESS		Change	Addition	1
MIAMI FL 33125		1.4 Cl 2.1 Tll 2.2 N/2 2.3 ST 2.4 Cl	TY-ST-ZIP TLE AME TREET ADDRESS		<u></u> .		100
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		1.4 CF 2.1 TH 2.2 NA 2.3 ST 2.4 CF 3.1 TH 3.2 NA	TY-ST-ZIP TLE AME TREET ADDRESS JTY-ST-ZIP TLE AME		<u></u> .		
MIAMI FL 33125		1.4 Cl ⁻ 2.1 Tll 2.2 NA 2.3 ST 2.4 Cl 3.1 Tll 3.2 NA 3.3 ST	TY-ST-ZIP TLE TREET ADDRESS JTY-ST-ZIP TLE AME TREET ADDRESS		<u></u> .		
	[] DELETE	1.4 Cl ⁻ 2.1 Tl 2.2 N ² 2.3 ST 2.4 Cl 3.1 Tl 3.2 N ² 3.3 ST 3.4. Cl	TY-ST-ZIP TLE TREET ADDRESS TY-ST-ZIP TLE AME TREET ADDRESS TY-ST-ZIP TREET ADDRESS TY-ST-ZIP		☐ Change	Addition	
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	[] DELETE	1.4 CI 2.1 TII 22 NV 2.3 ST 2.4 C 3.1 TII 3.2 NA 3.3 ST 3.4 C 4.1 TII 4.2 N	TY-ST-ZIP TLE TREET ADDRESS TIVY-ST-ZIP TLE AME TREET ADDRESS TIVY-ST-ZIP TLE AME TREET ADDRESS TIVY-ST-ZIP TLE AME		☐ Change	Addition	1
	[] DELETE	2.1 TI 22 N 2.3 ST 2.4 C 3.1 TI 3.2 N 4.3 ST 3.4 C 4.1 TI 4.2 N 4.3 ST	TY-ST-ZIP TLE TREET ADDRESS TIVY-ST-ZIP TLE AME TREET ADDRESS TY-ST-ZIP TLE AME TREET ADDRESS TREET ADDRESS		☐ Change	Addition	
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	[] DELETE	1.4 CI 2.1 TII 22 NV 2.3 ST 2.4 C 3.1 TII 3.2 NA 3.3 ST 3.4 C 4.1 TII 4.2 N 4.3 ST 4.4 CI 5.1 TI 5.1 TI	TY-ST-ZIP TLE TREET ADDRESS JTY-ST-ZIP TLE AME TREET ADDRESS JTY-ST-ZIP TLE AME TREET ADDRESS JTY-ST-ZIP TLE TREET ADDRESS TY-ST-ZIP TLE TREET ADDRESS		☐ Change	Addition	
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	Country 25 9. Name and Address of Curren MEZ, ALTAGRACIA I NW S. RIVER DR. #22 MI FL 33125 to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga Signature, typed or printed name of registered ager OFFICERS AN DPS GOMEZ, ALTAGRACIA	82 NE 26 ST MIAMI FL 33137 US Lace of Business 2a. Mailing Address 26 #, etc Suite, Apt. #, etc 27 a	82 NE 26 ST MAMM FL 33137 US Lace of Business 2a. Mailing Address 26 #, etc	82 NE 26 ST MIAMI FL 33137 US Lace of Business 2a. Mailing Address 2b. Mailing Address 2c. Suite, Apt. #, etc. 27 28 City & State 28 Country 25 29 30 9. Name and Address of Current Registered Agent AEZ, ALTAGRACIA I NW S. RIVER DR. #22 MI FL 33125 83 84 City to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corregistered agent, or both, in the State of Florida. Such change was authorized by the corporation familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Signature, typed or printed name of registered agent and title if applicable. OFFICERS AND DIRECTORS 13. DELETE 1.1 TITLE	Mailing Address 82 NE 26 ST MIAMI FL 33137 US DO NOT WRITE IN THIS 3. Date Incorporated or Qualifed 07/10/1989 4. FEI Number 65-0125206 #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Country Zip Country Zip Country B. This corporation owes the current year in Personal Property Tax. 9. Name and Address of Current Registered Agent MEZ, ALTAGRACIA I NW S. RIVER DR. #22 MI FL 33125 83 Recition Companies Not Acceptable) Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent required when reinstating) DELETE 11 TITLE DO NOT WRITE IN THIS A ADDITIONS/CHANGES TO OFFICERS A	Mailing Address R2 NE 26 ST MiAM FL 33137 US 2a. Mailing Address Lace of Business Lace of	Mailing Address 82 N.E & ST MAMM FL 33137 US 2a. Mailing Address 1ace of Business 2b. Mailing Address 1ce of Business 2country 2

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 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 on an attachment with an address, with all other like empowered.