

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 31, 1999 8:00 am
Secretary of State

03-31-1999 90022 014 ***150.00

DOCUMENT # L02197

1. Corporation Name

CECI'S TEES, INC.

Principal Place of Business
1425 SE 17TH STREET
FT. LAUDERDALE FL 33316

Mailing Address
1425 SE 17TH STREET
FT. LAUDERDALE FL 33316

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/13/1989

4. FEI Number
65-0232273

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing ☐ \$5.00 May Be
Trust Fund Contribution Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip Country

28 Zip Country

9. Name and Address of Current Registered Agent

CLASKY, RONALD ALVIN
336 NORTHBIRCH RD
APT. 3I
FORT LAUDERDALE FL 33304

10. Name and Address of New Registered Agent

81 Name CLASKY, RONALD ALVIN
82 Street Address (P.O. Box Number is Not Acceptable)
444 S.E. 14TH STREET
83
84 City DANIA BEACH, FL 85 Zip Code 33004

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
VDTS	CLASKY, RONALD A	336 NO BIRCH RD APT 3I	FT LAUDERDALE FL	<input type="checkbox"/>
T	CLASKY, RONALD A.	336 NORTHBIRCH RD APT. 3I	FORT LAUDERDALE FL	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	Change	Addition
PRESIDENT	CLASKY, CECI	444 S.E. 14TH ST	DANIA BEACH, FL 33004	<input type="checkbox"/>	<input checked="" type="checkbox"/>
VICE PRESIDENT	CLASKY, DAVID	444 S.E. 14TH ST.	DANIA BEACH, FL 33004	<input type="checkbox"/>	<input checked="" type="checkbox"/>
SECRETARY, TREASURER	RONALD A CLASKY	444 S.E. 14TH ST.	DANIA BEACH, FL 33004	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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.

SIGNATURE: Ronald A. Clasky REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/30/99 954-766-9970
Date Daytime Phone #