2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Sep 14, 2004 8:00 am Secretary of State

40<u>4-659-2424</u>

Daytime Phone #

1. Entity Name TOMMY BAHAMA ORLANDO, LLC								09-14-	-2004 9000	57 026 ** [;]	**50.00
Principal Place of Business C/O VIEWPOINT INTERNATIONAL, INC. 1071 AVENUE OF THE AMERICAS NEW YORK, NY 10018			Mailing Address ACCOUNTS PAYABLE 1809 SEVENTH AVENUE, SUITE 806 SEATTLE, WA 98101					8 8 113 7 18 11 8 8 8 11 8 3 8 11			
2. Principal Place of Business The Mall at Millenia Suite, Apt. #, etc. 7			3. Mailing Address Tax Dept. Oxford Industries, Inc. Suite, Apt. #, etc.			•					
4200 Conroy Rd., Ste A-138 City & State Orlando, FL			City & State				08232004 4. FEI Number		CR2E0	183 (10/03) Ap	plied For
Zip	.O, FU	Country	Atlanta, GA	Coun	try		03-038	3359			t Applicable
32839		USA	30308	USA	•		5. Certificate	of Status Desired	d 🔲	\$5.00 Add Fee Required	
6. Name and Address of Current R			egistered Agent Name				7. Name and	Address of Nev	w Registered	Agent	
CORPORA	ATION SEI	RVICE COMPANY			ivairie						
1201 HAYS STREET TALLAHASSEE, FL 32301-2525			Street Addres			ddress (F	P.O. Box Number	er is Not Accepta	able)		
	10 11 11 12				City				FL	Zip Code	
8. The above	named entity	y submits this statement for tered agent.	the purpose of changing its	registere	ed office or r	registere	ed agent, or bot	th, in the State of		familiar with,	and accept
SIGNATURE	i	or printed name of registered agent an	d title if applicable (NOTE	: Registere	d Agent signatur	ra required	when reinstating)		DATE		
	ing Fee is	\$50.00					i.	1 1 1 1 1 1 1 1 M	lake check p	avable to	
Due b	y Septen	nber 8, 2004					ŀ		ida Departm		
9.				10.				Flori		ent of State	
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SIGNATURE: DOMNISC Ma Zone UP & Sec. 917/04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Dollar