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FILED

May 20 1997 8:00am  
Secretary of State

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # N14198 (8)

1. Corporation Name

UNITED STATES APPAREL INDUSTRY COUNCIL, INC.

Principal Place of Business

5200 BLUE LAGOON DR. STE 600  
MIAMI FL 33126

Mailing Address

5200 BLUE LAGOON DR. STE 600  
MIAMI FL 33126-7002

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

TRAVIS, THOMAS G.  
5200 BLUE LAGOON DRIVE, STE 600  
MIAMI FL 33126

3. Date Incorporated or Qualified  
04/04/1986

3a. Date of Last Report  
03/22/1996

4. FEI Number

59-2701429

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. 199.002,  
Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, 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 VD ☐ DELETE  
NAME KILGORE, JAMES  
STREET ADDRESS 1155 BATTERY ST.  
CITY-ST-ZIP SAN FRANCISCO CA

TITLE PD ☐ DELETE  
NAME SCULLY, JAMES  
STREET ADDRESS 6113 LEMMON AVE.  
CITY-ST-ZIP DALLAS TX

TITLE D ☐ DELETE  
NAME COOK, JERRY  
STREET ADDRESS 1000 E HANES MILL RD  
CITY-ST-ZIP WINSTON-SALEM NC 27105

TITLE D ☐ DELETE  
NAME MANO, HOWARD  
STREET ADDRESS 7905 W. 20TH AVE  
CITY-ST-ZIP HIALEAH FL

TITLE D ☐ DELETE  
NAME GINN, DAVID  
STREET ADDRESS 222 PIEDMONT AVE NE  
CITY-ST-ZIP ATLANTA GA 30308

TITLE D ☐ DELETE  
NAME ROWAN, ROBERT  
STREET ADDRESS 335 CHURCH CT  
CITY-ST-ZIP GREENSBORO NC

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

SIGNATURE

CR2E037 (9/96)