0071184 AI

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

Principal Place of Business

2. Principal Place of Business

851 SAN REMO DRIVE

Suite, Apt. #, etc.

WESTON FL 33326

P01000109067

Mailing Address

851 SAN REMO DRIVE

WESTON FL 33326

3. Mailing Address 8840 S.

Suite, Apt. #, etc.

W.67 Ct.

1. Entity Name

AA SPORTSWEAR, INC.

FILED Aug 25, 2002 8:00 am Secretary of State

02-20-2002 90140 048 ***150.00 08-25-2002 90217 019 ***550.00

# 100#1007 171 00#71 1701 POAT 88114 00144 17014 1807 1807 1807 1807 1807 1807 1	ı

DO NOT WRITE IN THIS SPACE

City & Stat	te	City & State		4.(FEI Number 1153 19	7	Applied For
Zip	Country	Miami, FL Zip 33156	Country Dade	5.	Certificate of Status Desired		Not Applicat 75 Additional Required
	6. Name and Address of Cui		1 2000		Name and Address of New Re		
	المراجع		.~≕ * Na	me		an Annual or	
HOBAN, (CHIE K		Str	eet Address (P.O. F	Box Number is Not Acceptable	<u> </u>	
7355 NW							
MIAMI FL	33166						
			City	у		FL Z	Ip Code
the obligat	e named entity submits this statemetions of registered agent.	ent for the purpose of changing	g its registered offi	ice or registered ag	gent, or both, in the State of Flor	ida. I am familia	ar with, and accep
SIMILATIONE :	Southern typed or printed name of registered	agent and title if applicable.	(NOTE: Registered Agent	signature required when re	einstating)	DATE	
Tax filing r (See criter		After September Make Check Pa	W!!! FEE IS \$ r 13, 2002 Fee w lyable to Depart	vill be \$750.00	10. Election Campaign Fina Trust Fund Contribution		\$5.00 May Be Added to Fees
11.		AND DIRECTORS	12.	AD	DITIONS/CHANGES TO OFFIC	CERS AND DIRE	ECTORS IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD KHO, TAE YOUNG 851 SAN REMO DRIVE WESTON FL 33326	☐ Delete	TITLE NAME STREET ADDR CITY-ST-ZIP	1			Change
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	ertify that the information supplied	☐ Delete	NAME STREET ADDRI CITY-ST-ZIP			c	-

indicated on this report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIG