2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P01000118327

EXPRESS CORPORATE APPAREL, INC.

Mailing Address

2112 SUNNYDALE BOULEVARD CLEARWATER, FL 33765

FILED

Apr 21, 2004 08:00 AM Secretary of State

DO NOT WRITE IN THIS SPACE

5. Name and Address of Current Registered Agent

| 01122004 | No Chg-P | CR2E034 (10/03) | |
|----------|----------|-----------------|--|

Applied For 4. FEI Number 59-3760910 Not Applicable \$8.75 Additional

5. Certificate of Status Desired Fee Required

SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145

SIGNATURE: 🗘

Principal Place of Business

CLEARWATER, FL 33765

UNIT E

2112 SUNNYDALE BOULEVARD

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| | named entity submits this statement for the pions of registered agent. | surpose of changing its registere | d office or r | egistered agent, or bo | th, in the State of Florida. I am familiar with, and acco | ept |
|---|--|---|--|--|---|-------------------|
| SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature requ | | | required when reinstating) | DATE | | |
| FREE RELIEVES FEE IN AIRCLESS | | Election Campaign Finan Trust Fund Contribution. | Election Campaign Financing \$5.00 May Be Trust Fund Contribution. | | <u> </u> | - |
| 10. | OFFICERS AND DIREC | CTORS | | | <u> </u> | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD DONAHUE, RICHARD E 2112 SUNNYDALE BOULEVARD CLEARWATER, FL 33765 | | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | SVD SPICUZZA, JAMES M 2112 SUNNYDALE BOULEVARD CLEARWATER, FL 33765 | | | | | - |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VTD DONAHUE, SEAN P 2112 SUNNYDALE BOULEVARD CLEARWATER, FL 33765 | | | DO | NOT WRITE | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | IN. | THIS SPACE | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | | | |
| 12. I hereby indicated of the corchanged | certify that the information supplied with this fi on this report or supplemental report is true a portation or the receiver or trustee empowere , or on an attachment with an address, with al | iling does not qualify for the exe and accurate and that my signa d to execute this report as requi Il other like empowered. | mption state ture shall ha red by Char | ed in Section 119.07(3) we the same legal effector 607_Florida Statut | (i), Florida Statutes, I further certify that the information of imade under oath; that I am an officer or directes; and that my name appears in Block 10 or Block, 1 | on tor 1 if |