

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2007 08:00 AM
Secretary of State

DOCUMENT # P05000001727

1. Entity Name
FIFTH AVENUE MEN'S WEAR, INC.



Principal Place of Business

1248 S BROAD STREET
BROOKSVILLE, FL 34601 US

Mailing Address

1248 S BROAD STREET
BROOKSVILLE, FL 34601 US



04162007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
25-1907366

Applied For
Not Applicable

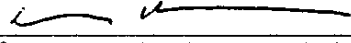
5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HAMDAN, MOHAMMAD Y
3172 GREYNOLDS AVE
SPRINGHILL, FL 34608

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

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

(NOTE: Registered Agent signature required when reinstating)

4-20-07
DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
D,C
HAMDAN, MOHAMMAD Y
3172 GREYNOLDS AVE.
SPRINGHILL, FL 34608

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
P,VP
HAMDAN, MOHAMMAD Y
3172 GREYNOLDS AVE.
SPRINGHILL, FL 34608

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
T,S
HAMDAN, MOHAMMAD Y
3172 GREYNOLDS AVE.
SPRINGHILL, FL 34608

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

U00000723168
05/02/07-80060-009 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied in this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information 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; and that my name appears in Block 10 or Block 11 if applicable.

SIGNATURE

**SIGN
HERE**


SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-20-07 352-796-4094