

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000123370

FILED  
Jan 22, 2007  
Secretary of State

Entity Name: THE SIGNATURE CLOTHING INC

## Current Principal Place of Business:

9501 ARLINGTON EXPRESSWAY  
SUITE 430  
JACKSONVILLE, FL 32225

## New Principal Place of Business:

## Current Mailing Address:

9501 ARLINGTON EXPRESSWAY  
SUITE 430  
JACKSONVILLE, FL 32225

## New Mailing Address:

FEI Number: 20-3467414

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KHALED, LUBNA  
9501 ARLINGTON EXPRESSWAY  
SUITE 430  
JACKSONVILLE, FL 32225 US

## Name and Address of New Registered Agent:

KHALED, MOHAMMAD  
9501 ARLINGTON EXPRESSWAY  
SUITE 430  
JACKSONVILLE, FL 32225 US

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.

SIGNATURE: MOHAMMAD KHALED

01/22/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PST ( ) Delete  
Name: KHALED, LUBNA  
Address: 9501 ARLINGTON EXPRESSWAY SUITE 430  
City-St-Zip: JACKSONVILLE, FL 32225

Title: D ( ) Delete  
Name: KHALED, MOHAMMAD A  
Address: 9501 ARLINGTON EXPRESSWAY SUITE 430  
City-St-Zip: JACKSONVILLE, FL 32225

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change ( ) Addition  
Name: KHALED, MOHAMMAD  
Address: 9501 ARLINGTON EXPRESSWAY SUITE 430  
City-St-Zip: JACKSONVILLE, FL 32225

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: V.P. ( ) Change (X) Addition  
Name: ALLAA, KHALED  
Address: 9501 ARLINGTON EXPY SUITE 430  
City-St-Zip: JACKSONVILLE, FL 32225

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MOHAMMAD KHALED

PST

01/22/2007

Electronic Signature of Signing Officer or Director

Date