2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 08, 2007
Secretary of State

DOCUMENT# P06000135205

Entity Name: ANTHONYS TSHIRTS CO.

Current Principal Place of Business:

9325 ARBORWOOD CIRCLE
DAVIE, FL 333286772

New Principal Place of Business:

Current Mailing Address:

9325 ARBORWOOD CIRCLE
DAVIE, FL 333286772

New Mailing Address:

FEI Number: 20-5824087 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ORTEGA, ANTONIO
9325 ARBORWOOD CIRCLE
DAVIE, FL 333286772 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: ORTEGA, ANTONIO
Address: 9325 ARBORWOOD CIRCLE
City-St-Zip: DAVIE, FL 333286772

Title: V ( ) Delete
Name: ORTEGA, DELMIS Y
Address: 9325 ARBORWOOD CIRCLE
City-St-Zip: DAVIE, FL 333286772

Title: S ( ) Delete
Name: MCLEESE, MARIBELLE
Address: 6780 SW 10 ST
City-St-Zip: PEMBROKE PINES, FL 33023

Title: T ( ) Delete
Name: ORTEGA, GRACIELA
Address: 6780 SW 10 ST
City-St-Zip: PEMBROKE PINES, FL 33023

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: ANTONIO ORTEGA P 02/08/2007

Electronic Signature of Signing Officer or Director — Date