2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # D7 4412 1. Entity Name KANTOK BROS. NECKWEAR CO., INC. FILED 00 JUL 13 PM 2:50 Mailing Address Principal Place of Business SECRETARY OF STATE 6601 LYONS RD TALLAHASSEE FLORIDA 3. Mailing Address 2. Principal Place of Business 6601 LYONS Kd. 6601 LYONS Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. 6-4 City & State Applied For 4. FEI Number City & State (REEK CREEK FL Not Applicable COCONUT Zip 33013 \$8.75 Additional 5. Certificate of Status Desired USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent THEODORE A. KANTOR Street Address (P.O. Box Number is Not Acceptable) 2471 NW 69TH COROLLO ST. BOCA RATON, FL. 33496 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. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make: Check Payable to Department of State (See criteria on back) ---ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12 Addition CEO Change X Delete TITLE 300003337913--9 -07/27/00--01007--003 THEODORE A KANTOR NAME NAME 2471 NW 631 ST. STREET ADDRESS STREET ADDRESS BOCA RATON FL. 33496 CITY-ST-ZIP CITY-ST-ZIP ****150.00 ****150.00 Change Delete TITLE TITLE WEFFREY KANTOR 4167NW 60TH CIRCLE BOCA RATON, FL 33496 NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE SCOTT KANTOR NAME NAME 12714 NW 184 G. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CORN SPEINGS, FL 33071 CITY-ST-ZIP ☐ Addition ☐ Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change noitibbA Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information 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 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

· JEFFREY KANTOR 7/10/00





FACTORY & OFFICE 8601 Lyons Road • Suite#E4 Coconut Creek, Florida 33073 Phone (954) 426-8030 Fax: (954) 426-8188 SHOWROOM & SALES OFFICE 350 5th Avenue • Suite 4617 New York City, New York 10118 Phone (212) 868-2367 Fax (212) 895-3392

July 11, 2000

Department of State Division of Corporations PO Box 6327 Tallahassee, FL 32314

Dear Sir,

I was advised to send you this letter by one of your customer service people along with our check for the \$150.00 renewal form.

We at Kantor Bros. Neckwear Co., Inc. have totally changed our personel in our office and are doing everything ourselves as of last August. Myself and my brother Scott have taken charge of the office and bookkeeping now. We were unaware that the people prior to this change never renewed with your office on the proper date. I hope you can understand our frustrations with this and see fit to wave the penalty charge this one time for us. If you look at our history we have never been late before and do not see this happening ever again.

I thank you in advance for your time and cooperation with this matter and if there is anything else you need please do not hesitate to call me at (954)426-8030.

Sincerely,

President

cc: S. Kantor