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PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED

Jul 15 1997 8:00am

Secretary of State

DOCUMENT # P92000013957 (5)

SURFSIDE KNITWEAR, INC.

Principal Plac	e of Business	Mailing Address							
10010 N.W. 80TH AVE.		10010 N.W. 80TH AVE.							
HIALEAH GARDENS FL 33016-2405		HIALEAH GARDENS FL 33016-2304				•			
US		U\$				3. Date incorporated or Qualified 12/24/1992		te of Last R 7/1996	eport
2. Principal P	lace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number		· · · · · · · · · · · · · · · · · · ·	plied For
21		26			65-0388821 Not Applicable				
Suite, Apt. #, etc.		Suite, Apt. #, etc.	27			5. Certificate of Status Desired		\$8.75 / Fee Re	
City & Stat	0	City & State	City & State			6. Election Campaign Financing		\$5.00	May Be
23		28			Trust Fund Contribution		Added		
Zip	han ' han '			Country		8. This corporation has liability for i	tangible l		. 199.032,
24	25 29 31 9. Name and Address of Current Registered Agent		30	<u> 1</u>		Florida Statutes No			
GREENSPAN, STEVEN A					Name	IV. Name and Address of New Tree	Jistorea A	.gent	
	S BISCAYNE BOULEVARD			81					·
	E 400		82 Street Ac			ess (P.O. Box Number is Not Acceptab	le)		
	NTURA FL 33180			83		A. (- (- (- (- (- (- (- (- (- (
7,70	11010112 00100			1		× •····		T = T = 2	
				84	City		FL	85 Zip (Code
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statu	ites, the a	above	named corp	oration submits this statement for the p	urpose of	changing it	s registered
office of r agent. I a	registered agent, or both, in the State im familiar with, and accept the oblig	etr Florida. Sucri change was ations of, Section 607.0505, F	aumoriza Torida Sta	ea by Itutes	tne corporati	ion's board of directors. Thereby accep	стваррс	omunent as	registered
SIGNATURE									
	Signature, typed or printed name of registered age			ed Ager	nt signature requir	ed when reinstaling)	DATE	DIDEATOR	
12.	DPST DPST	D DIRECTORS DELETE	13. 1.1 T	ITI I		ADDITIONS/CHANGES TO OFFIC	ERS AND	☐ Change	Addition
NAME	LEVY, MICHAEL B			NAME.				Onlinge	
STREET ADDRESS	10010 N.W. 80TH AVE.				ADDRESS				
CITY-ST-ZIP	HIALEAH GARDENS FL 33016-	2405		CITY-S!					
THLE		DELFTE	2 1 TITLE					Change	Addition
NAME			. 22						
STREET ADDRESS			2.3		ADDRESS				
CITY-ST-ZIP			2. 4 CITY - ST - ZIP		T · ZIP				
TITLE		☐ DELFTE	_					L Change	Addition
NAME			321						ļ
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP		I DELETE	3.4 CHY-ST-7IP DELETE 4.1 TITLE		1-7IP			Chapao	Addition
TITLE		☐ vittit		name				L Change	ריין אטטונוטוו
NAME					ADDRESS				
STREET ADDRESS									
TITLE	DELETE			4.4 CITY-\$1-7IP 5.1 TITLE		· · · · · · · · · · · · · · · · · · ·		Change	Addition
NAME				NAME				•	
STREET ADDRESS					ADORESS				
CITY-ST-ZIP				C(1Y - S)					
TITLE		DELETE		TITLE				☐ Change	Addition
NAME			6.2 N	NAME.					
STREET ADORESS			6.3 5	STREET.	ADDRESS				
CITY-ST-ZIP			6.4 0	CITY-SI	I · ZIP				

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 in Block 12 or Block 13 if chapted or on an auto-inment with an address.